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No. 2.

ART. I.—*Obstetrical Memoranda.* Reported by the EDITOR.

At the January meeting of the District Medical Society for the County of Burlington, N. J., a rambling conversation occurred, in which some remarks were made by some of the members which we will endeavor to record as far as our memory will serve us.

Ergot.—DR. BUDD remarked that he was now attending a patient to whom he had administered ergot for the purpose of hastening the termination of a case of labor. He had never given the “confounded stuff” without regretting it afterwards. In this case the time and circumstances favored the use of the drug in an eminent degree. The os uteri was fully dilated, the presentation was natural, and nothing seemed wanting but an increase of uterine pains, which seemed to be very sluggish. Although fully borne out by the experience of others, yet, with his own former experience before his eyes, Dr. B. administered the ergot with some hesitancy, but with the desired effect of inducing uterine action. This was characteristic of the action of ergot, being persistent and strong; and there was nothing at the time that was unpleasant in the action of the drug. The labor terminated speedily and satisfactorily, but was followed by metritis, which Dr. B. feared was to be attributed to the persistent uterine action caused by the ergot. In case of the death of the patient, who was still very ill, the contemplation was to him by no means pleasant.

DR. GAUNTT understood Dr. Budd to say that some one had

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given the patient "No. 6" to "help the pains." He recommended Dr. B. to give the credit of the metritis to the stimulating action of this medicine. Dr. G. placed great reliance on ergot, and had frequently used it with the greatest satisfaction. He often used it where others employed the forceps, and thought it preferable in most cases except primiparæ.

DR. COLEMAN would be sorry to have a bad name given to ergot, for he often found it very useful, particularly, however, in cases of uterine hemorrhage. He had also used it with satisfaction, though he was understood to say that he did not use it habitually, in cases of labor.

DR. BUDD did not wish to be understood to condemn the use of the drug altogether, but it had been his experience never to use it in a case of labor without regretting it on account of its after effects. He often had recourse to warm drinks, as a cup of warm table tea, and found them to be of very great benefit in relaxing the system, inducing perspiration, and an increased flow of the vaginal secretions. Other members corroborated Dr. Budd's experience in this respect.

DR. STRATTON would not claim for rye any of the emmenagogue effects belonging to the ergot, yet he was in the habit of using rye tea, drank warm, and found it to answer a very good purpose; and his patients often attributed great virtue to it. In many cases, it is necessary to be "doing something," be it ever so simple, in order to engage the attention of the patient, and support her flagging energies. Rye tea can do no harm, and he is not prepared to say that it does not do positive good.

DR. GAUNT was in the habit of exhibiting ergot in combination with opium.

DR. STRATTON suggested whether the physiological action of the two drugs was not incompatible; whether the opium would not interfere with the characteristic effect of the ergot.

DR. COLEMAN thought not. He suggested that while the ergot acted on the organic nervous centres, the opium affected the nerves of sensation principally; instancing the action of chloroform, which, while it deadens sensibility, does not interfere with the expulsive action of the uterus.

Exciting Uterine Pains by Titillation.—DR. BUTLER mentioned

that he had observed some time since, in a British review of an American work on Obstetrics (by Prof. Miller, of Louisville), that the writer seemed disposed to ridicule the assertion by Prof. Miller, that uterine pains might be excited by introducing the finger within the margin of the os uteri, and passing it gently around, and by using slight traction. Dr. B. mentioned a case which recently came under his observation strongly confirmatory of Dr. Miller's suggestion. He was called to attend a woman aged about thirty-five, in her first confinement. There were two or three points of interest in this case. First, the case, although a first labor, was complicated by an extraordinary obliquity of the os uteri. It was so high on the sacrum that it was only with the greatest difficulty that it could be reached by the finger. The pains were frequent and violent, but almost entirely insufficient, from the fact that their force was expended on the anterior wall of the uterus, instead of against the os uteri. It was several hours before the os approached its normal position, in which effort he endeavored to aid nature by placing the woman on her back, by pressure on the anterior portion of the uterus, and by gentle traction on the os. In all his manipulations in this case, Dr. B. had to contend with violent uterine pains, which were often excited by even the slightest contact of the finger with the os. As soon as there was sufficient dilatation of the os, an attempt was made to introduce the forceps, which was only accomplished by the most patient and persevering manipulation, on account of the extraordinary susceptibility of the os; and still more difficult was it to lock them after they were introduced, from the same cause. Pain followed the contact of the finger or blade of the forceps with the os in this case so uniformly, that the patient begged him again and again not to "make a pain" until she felt stronger.

Dr. B. remarked incidentally, that after the forceps were properly locked on the head of the child, he never had a case which required the application of such powerful extractive force to effect delivery. To his mind it was a case that demonstrated the great value of the forceps.

Dr. B. had uniformly been in the habit of exciting pains by titillation, and he could not understand what spirit could have

dictated the criticism referred to at the commencement of his remarks.

DR. STRATTON, and several other members, said that they were in the habit of resorting to the same means to excite uterine contraction.

DR. COLEMAN said that it was well known that titillation of other sphincters and outlets of the body was followed by muscular action, and he could not see why the rule should not hold good in this instance. Titillation of the nostril excited sneezing; that of the fauces produced contraction of the stomach, causing vomiting; the passage of a sound or catheter through the urethra often excited the action of the bladder; and the same often held true in the case of the sphincter ani. The doctrine certainly has the support of analogy, to say nothing of experience.

Labor retarded by an Exostosis; Laceration of Scalp.—Dr. COOK mentioned a case of labor that came under his observation, in which he met a novel obstruction in what appeared to be an exostosis springing from one of the rami of the pubis. Delivery was accomplished with great difficulty, and not without an extensive laceration of the scalp of the child.

BIOGRAPHY.

ART. II.—*Biographical Notice of the Late John Ayrton Paris, M. D., F. R. S., F. L. S., &c. &c.*

[RECENT arrivals from England, announce the death of the distinguished Dr. Paris. The following account of him, taken from the *London Standard*, we copy from the *New York Times*.—ED. MED. AND SURG. REP.]

"It is with very sincere regret that we announce the death of this excellent and distinguished man, which occurred yesterday morning at 8½ o'clock, at his residence in Dover Street. Few men have run so long, and, at the same time, so honorable a career. For half a century precisely, Dr. Paris had practised as a physician, and had risen to the very highest honors which it was in the power of his professional brethren to bestow. He was born at Cambridge on August 7, in the year 1785, and, at twenty-two years of age, he was elected physician to the Westminster Hospital—a most distinguished

honor for so young a man; and he continued in the active exercise of his professional duties until within a fortnight of his death. For fifty years, then—a considerable period even in the history of a nation—was the gentleman, to whose memory we would fain offer a slight tribute of respect, actually engaged in the alleviation of suffering, and in the relief of afflicted humanity.

“To Dr. Paris, as is well known in the profession and to all persons more intimately acquainted with his career, the office of physician was no hireling’s work, to be hurried through for the purpose of accumulating a fortune or earning distinction. It was the business and glory of his life. When but fourteen years of age, he commenced his studies for the arduous profession on which he was about to enter, and followed them up with a zeal incredible in so young a person; when he had attained the ripe age of threescore years and ten, the old man, true to the resolution of the boy, voluntarily took upon himself the arduous duties of President of the Medical Council of the Board of Health, and with his own hand wrote the introductory report on the cholera of 1854.

“His personal history may be dismissed in a few brief sentences. Born at Cambridge, as we have said, in 1785, he became a member of Caius College, in the University, and graduated when very young in medicine. Among his contemporaries he was distinguished for the extent and elegance of his classical attainments. The Classical Tripos was not then in existence, and so, independently of the exigencies of his medical degree, he had not at the University any opportunity for displaying that fine and intimate knowledge of the writers of antiquity for which he was afterwards so distinguished, both in private life and as President of the College of Physicians. From Cambridge he went to Edinburgh, then remarkable as a school of medicine, and was the friend and intimate companion of the many celebrated men who, in the first years of the century, had congregated in the Scottish capital. On his return to London, at the age of twenty-two, he was elected, as we before said, physician at the Westminster Hospital, but soon after vacated the appointment, as it was his wish to establish himself in the town of Penzance, in Cornwall.

“During his residence at Penzance, Dr. Paris distinguished himself as the founder of the Royal Geological Society of Cornwall; this, we believe, was the first Geological Society in England. When at Penzance, too, he gave to the miners the great boon of the ‘tamping-bar,’ the instrument by which they are enabled to pursue their business amid inflammable gases without the fear of striking fire from the rock. By this simple but admirable invention, Paris no doubt saved more lives than many heroes have destroyed. In the year 1810 he returned to London, and here, for forty-five or forty-six years, he was actively occupied as a practising physician. He was elected President of the College of Physicians in the year 1844, and this office he held until the hour of his death.

“Dr. Paris was not only known as a physician of the highest eminence—he was as remarkable for his literary ability. The *Life of Sir Humphrey*

Davy will ever remain one of the classical biographies of the English language. In connection with Mr. Fonblanque he also wrote the *Medical Jurisprudence*, which has remained a text-book with lawyers until our own day. His works of a more professional character were his treatise *On Diet*, which first brought him into notice, and which was published at a very early age; his *Pharmacologia*, which has run through more editions than most books; and his work *On Medical Chemistry*. Besides these, and many other acknowledged publications, his *Philosophy in Sport* has attained an enormous popularity, and with his life, the motive for an *incognito* which was never really maintained, has altogether terminated. In so brief a notice as the one to which we are necessarily limited by considerations of space, we can say but little more.

"The last ten days of Dr. Paris' life were spent in the midst of excruciating sufferings, which were borne with the most remarkable fortitude. His chief concern appeared to be to console and comfort those around him, who could ill disguise their grief at the impending and irreparable loss. His intellect remained to the last as clear as at any time of his life, and while power of speech remained, nobody who listened to him could believe that the end was so near at hand. The public and the medical profession have suffered a great loss in the death of John Ayrton Paris, one of the most disinterested, honorable, and able men who have ever practised the profession of medicine. The grief of his own family, and of those whom he honored with his friendship, is not matter of public concern, save in so far as it may serve to show how this wise and good man was honored and beloved by those who knew him best."

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EDITORIAL.

THE PRESIDENCY, AND PLACE OF MEETING OF THE AMERICAN
MEDICAL ASSOCIATION.

No member of the profession who has any regard for the honor and interest of medical science in this country, can regard with any other than feelings of the loftiest pride, the achievements and position of our National Medical Organization. It has been in existence but a few years, not having yet attained its majority, and yet so much has already been accomplished by it, that we have just reason to be proud of our Association. We are aware that there are defects in its organization, but it does not follow that they may not, or that they will not be removed by time.

We are also aware that some members of the profession expect *too much* from the Association—that they look for its positive action in the correction of abuses which it can only reach by a sort of moral influence. The Association is not a law making power for the profession at large. It has a code of ethics for the government of *its members*, and all the power it has, is, to cut them off from membership for non-conformity to its code. This it has done, and this we trust it will always do whenever occasion requires.

Among the more prominent defects in the machinery of the Association hitherto, is the law ordained by custom, that the President of the Association should be chosen from among the profession of the city in which its meeting is held. This policy may be said to have been inaugurated at the second annual meeting of the Association held in Boston, in 1849. Dr. Jonathan Knight, of New Haven, was President of the preliminary convention held in New York, in 1846, and in the convention at which the Association was formed, held in Philadelphia in 1847, Dr. Nathaniel Chapman, was chosen its first President. Although Dr. Chapman was a resident of that city, we doubt whether any one will question the propriety of this choice, as

he unquestionably stood at the head of the profession in the country. At the first annual meeting held in Baltimore, the President chosen—Dr. A. H. Stevens—was a resident of New York. So that, in reality, the policy of choosing the President from among the profession of the city where the Association meets, was inaugurated in Boston, when Dr. John C. Warren was chosen. We must not be understood to complain of the propriety of the choice in any of these cases, for all the distinguished men who have occupied the post in question, were eminently worthy of the honor, under the rule by which they were elected. But with Dr. Hunt, of the *Buffalo Journal*, we think the time has come when the Presidency of the American Medical Association should not be measured by any local considerations, or bound by precedent, but should be an honor conferred by the profession of a nation, on its most distinguished member, whether he be a resident of the city or State where the meeting is held or not. We are glad to see that the medical press, and the profession generally, are ripe for a return to the original order of things, and it is especially honorable to the profession of Tennessee, the State in which the next meeting is to be held—for we have no doubt but the *Nashville Journal* represents the sentiments of the profession of that State—that they have come forward with a commendable eagerness, to have the proposed change made at the ensuing meeting at Nashville. The presidency of our National Medical Association should be regarded as a mark of distinction conferred by the profession of a nation on one of its members, in gratitude for actual service rendered to the cause of medical science, and to the interests of the Association, whether he be a resident of a large city, or of some country hamlet.

With regard to the place of meeting of the Association, we think that the time approaches when the migratory character of the meetings should be in part, at least, done away with. We think that, so far, the plan has been a wise one, and when the Association shall have had one session in the southwestern section of the country, when the profession of all sections of the Union, except the extreme West, will have had an opportunity of forming its acquaintance, as it were, some proper place should be chosen, where most of its sessions should be held.

Washington has been proposed as the most proper place, and it strikes us as eminently so, particularly if, as we think is possi-

ble, some arrangement can be made by which apartments in the Smithsonian Institution could be devoted to its uses. We would not have every session of the Association held at any one point, but would have at least one out of every three held in other parts of the country. A writer in the *Peninsular Journal of Medicine* proposes that every third meeting should be held in Philadelphia, but we should prefer that they be held at the seat of the national government. We hope this question will come up for discussion at Nashville.

MEDICAL FEES.

We are much mistaken if the sentiment of the profession will not bear us out in complaining of the low rate at which physicians are compelled by custom to labor. It is certainly disgraceful to the profession that there is such an abuse of the honorarium for medical attendance, and for much of this disgrace the profession is itself responsible, through its unworthy members. Small as doctors' bills are, it is considered a merit by a great many to cheat them out of the whole or a part of their hard earnings, and yet when a doctor has money dealings with others, he is expected to pay promptly to "the uttermost farthing," on failure of which he is liable to abuse and the expense of lawsuits, though he may be doing the community in which he resides good service, for which he is inadequately paid, if at all.

While living has advanced in cost from twenty-five to fifty per cent. and more, we are bound by fee-tables that our grand-sires conned over, and regulated their charges by. These fee-tables should be utterly abolished, or amended so as to give the physician a proper remuneration for his labor.

In the region in which we reside, custom allows the physician to charge one dollar for a visit "to the country." It has been our experience to hire horses at an expense of one dollar and a quarter to visit country patients; who, if they paid us anything at all for the visit, advice, and medicines, paid us *one dollar*, for which we have had to wait for several years.

The whole system of medical fees needs revising. No physician can live on the remuneration custom now allows, unless he does a business entirely disproportionate to his power of endurance, giving him neither the time nor the inclination to enrich

his mind with stores of knowledge from his library (if, fortunately, he had the means to furnish himself with one), which he can apply to a practical use at the bedside of his patient.

We copy elsewhere several articles on this subject, and hope that our professional brethren will seriously consider the necessity of adopting a higher rate of charges if any at all.

THE JOURNALS.

We very much regret our inability to do justice to our numerous and valued exchanges. We intend, as far as practicable, to give extracts from them every month, as they all contain much that is of value and interest to the profession.

We have remarked of late a vast improvement in the external appearance of nearly all our exchanges; and, what is of much more importance, we think there is a decided advance in their literary merits. We perceive that the feature we introduced, a few years since, of publishing steel engraved portraits has become quite popular, several of our exchanges being embellished with them.

A few of the journals call for special notice at this time.

We have before us the first number of the *North American Medico-Chirurgical Review*, the result of the combination of the *Medical Examiner* and the *Louisville Review*. It is edited by Profs. Gross and Richardson, and published by J. B. Lippincott & Co., of Philadelphia. The known character of both the editors and publishers gives assurance that the *Review* will prove a credit to the profession and the country. The number before us is an excellent initial number, and the work promises to be one of our best medical periodicals. A prominent feature of the work is the review department, which has hitherto been a great lack in our medical literature. There is only one thing about the work that we take exception to, and that is, its very long name. It looks a good deal like aping its British namesake and rival.

But while we welcome the *Review*, we must not forget to give a parting word to our late friend, the *Examiner*. We much regret the painful necessity of parting with it and its amiable editor, Dr. Hollingsworth. The *Examiner* has been an efficient co-worker in the cause of medical science, and there are many who will miss its monthly visits. We doubt, however, whether Dr. Hollings-

worth will regret to divest himself of the trials and responsibilities of editorial life.

The *California State Medical Journal*, two copies of which we have received, is a very creditable work, being filled with interesting and useful matter. It gives evidence of great intelligence in the profession of that young State.

We are sorry to learn that there is any ground to fear that the enterprise may not succeed, and trust we shall hear that the profession of California have rallied to its support. We are sure, from the numbers before us, that they will never regret it.

The *Southern Journal of the Medical and Physical Sciences*, published at Knoxville, Tenn., which we had supposed was defunct, has revived after a long intermission. It is, and always has been, a good journal, and we hope that nothing will hereafter interfere with its regular publication.

The January number of the *Western Lancet* comes to us enlarged, and very much improved in dress, and with a good assortment of editorial, original and selected matter. It has passed into the hands of Dr. Geo. C. Blackman, Professor of Surgery in the Medical College of Ohio, who will hereafter be sole editor and proprietor. In Dr. Wood, the late editor of the *Lancet*, the editorial corps loses a valuable member, and we regret to part with him.

The *Southern Medical and Surgical Journal*, one of our best exchanges, begins its thirteenth volume (new series) under new auspices. Drs. Dugas and Rosignol retire in favor of Drs. Henry F. and Robert Campbell, of the Medical College of Georgia.

In the above rôle are the names of no less than four, who have been prominent and efficient co-workers in the editorial field, who have renounced its cares and responsibilities, which will most likely be taken as evidence that there is "something rotten in Denmark."

We have received the first number of the *Druggist's Circular*, a quarto of eight pages, published monthly by Bridgman & Co., No. 158 Grand Street, N. Y. It makes a very creditable appearance.

THE SCHOOLS, ETC.

Medical Commencement in Yale College.—We copy the following

account of the recent medical commencement in Yale College, from the *New York Daily Times*. We would be glad if some of our numerous readers in New Haven would interest themselves in keeping us apprised of such matters as transpire in their city and vicinity, as will be of interest to the profession.

NEW HAVEN, Jan. 16, 1857.

The medical department connected with Yale College held its annual commencement last evening. Heretofore, the exercises have been held almost in obscurity, a room in the Medical College affording ample accommodation for the few who cared to attend. Last night quite an advance was made. A stage was erected in the College Chapel of sufficient size for the accommodation of the Medical Faculty; and by the appliances usually employed, such as handbills, cards of invitation, &c., quite a respectable audience was collected. The Valedictory Address, usual on such occasions, was delivered by John W. Hooker, who discussed "Character and Reputation." Defining the former as what a man really is, and the latter what men think him to be, he proceeded to speak of the peculiar temptations there are for a physician to attempt to acquire the latter at the expense of the former. Mr. H. concluded by bidding farewell to the faculty and to his fellow-students, and was followed by Hon. Wm. W. Welch, M. D., Member of Congress from the Fourth District, in this State, who delivered an address to the members of the graduating class. After the Hon. M. D. had given a sketch of the history of the art of medicine, and offered some excellent advice to those who were about entering on their professional career, President Woolsey conferred the Degree of Doctor of Medicine on the following named gentlemen: Asa Hopkins Churchill, New Haven; Geo. Clary, Hartford; C. Van Rensselaer Creed, New Haven; David Anson Hedges, New York City; John Worthington Hooker, New Haven; Chas. R. Osborne, New York City; Homer Lee Parsons, Branford, Conn.; Ozias Willard Peck, New Haven; Ezra Smith, Willseyville, N. Y.; John Witter, N. Woodstock, Conn.; Saml. R. Wooster, Birmingham, Conn.

American Subserviency to Foreign Medical Literature.—As an evidence of the subserviency of a portion of the American medical press to foreign literature, we would mention that in the *REPORTER* for May, 1854, we published a summary of an article published by Dr. Henry S. Patterson, in the *Medical Examiner*, on the "Treatment of Ulcers," in which Dr. P. gave a formula for the preparation of *Spender's Chalk Ointment*. This summary of ours went


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the rounds of the medical journals at the time, and found its way into the *Edinburgh Medical Journal*; and Spender's formula is now going the rounds of our journals again, credited to the *Edinburgh Journal*!

In a number of instances articles, copied from the *REPORTER*, have been credited to foreign journals, some have not been credited at all, others have been credited to some of our American contemporaries, and others still to the *New York Medical and Surgical Reporter*.

Boston Correspondence.—We have the pleasure to present to our readers this month two letters from our Boston correspondent. One of them was intended for the January number, but came to hand too late. We shall extend this feature of the *REPORTER* as far as we think it will be profitable to our readers. Our correspondents in Philadelphia, New York, and Boston, are all prominent men, and enjoy good facilities for acquiring information that will be of interest to the profession.

We are always glad to receive communications from any part of the country containing facts of interest to the profession.

 The occurrence of a severe and widely extended snow-storm blocking railroads, and interfering with travel in every direction, just as we were collecting material for this number, has prevented our receiving matter that was calculated upon. Hence the unusual lack of original matter. This defect, however, we think, is amply compensated for to a certain extent, at least, by the number and variety of the articles we have been able to draw from our valuable exchanges. Indeed, we are glad of the opportunity of making selections from them, and only regret that we cannot oftener draw upon them to enrich our pages.

EDITORIAL CORRESPONDENCE.

"MORAL INSANITY."

NEW YORK, January, 1857.

MR. EDITOR: Moral insanity has, during the past month, been the great topic of discussion in and out of the profession, in this vicinity. It is talked of in the cars, it is discussed in the saloons, it is the staple on 'change, at

the corners of the streets, in the halls of science, and in courts of law. Since the last general election, nothing has so stirred the depths of society as this. The newspapers still ring with it; long leaders meet the eye, headed with those portentous words; the press groans under its influence; the shop windows are darkened with caricatures of it; tales of "fiction founded on fact," with this subject for the basis, fill long columns in the Sunday papers, and in staring capitals, a foot or more in length, it glares upon the walls and fences, in the form of advertisements, and all because two legal gentlemen got their heads together to keep a notorious rascal out of State Prison, on the plea of "Moral Insanity." That was the talismanic word that was to break his shackles, and set him free to roam at large once more among the innocent money-changers of Wall Street.

A new form of mental disorder has become inaugurated into our text-books of insanity—*Monomania Huntingtoniensis*—in plain English, a propensity to write other people's names to promissory notes, and raise the money with them.

For about a year past an individual named Huntingdon has been preying with most consummate dexterity upon certain parties in Wall Street; raising by forged notes, money, to the extent, it is said, of about five millions of dollars, covering up his criminal acts, from time to time, by fresh forgeries of securities, and paying large percentages on the borrowed thousands. The money he spent sumptuously in riotous living, until, by a miscalculation of a month, as to the time when one of the alleged notes would fall due, the bubble burst, and that night our hero slept in the Tombs. So plain and abundant were the evidences of guilt, that no possible chance of escape remained to the criminal, but the desperate one which none but a lawyer of the boldest and most acute character would dare to raise, as a "plea in bar." Such astounding and long-continued criminalities could only have been conducted by a lunatic! To confess the whole, to magnify the crime, and then set up, before the jury, the plea of insanity, was their forlorn, their only hope. But what evidence of this, beside their own assertion, could they adduce? With a shrewdness more profound than the thought itself, they succeeded in inveigling into their plans two notable gentlemen of the medical profession, who, themselves above reproach or suspicion, were too easily led into the meshes prepared for them by these cunning gentlemen of the law. They visited the prisoner in his cell, conversed with him an hour or so, and although entirely unacquainted with him before, came from the interview prepared to give their professional opinions to the jury and to the world, that the prisoner was a *monomaniac*, whose insanity showed itself in an uncontrollable propensity, to use the brokers' phrase, "to make paper." Alas! for professional wisdom! Who is a criminal, if Huntington is insane? Answer, shade of Pinel! Answer, Esquirol and Miss Dix!

Of the medical gentlemen upon whose names and opinions the defence relied for an acquittal, one has been a tower of strength heretofore among us in Surgery, and the other known as a professor of Obstetrics. How high the first stood in public estimation, you may judge from the fact that when

his evidence went forth on the wings of the press, the next day, not only all money-dom, but all prison-dom, and all kinds of *dom*, were thrown into a ferment of astonishment; some fearing lest a great criminal should escape, others hoping that crime of every sort might now be committed with impunity. Fortunately for the stability of society, the jury exercised their common sense, and the honest portion of the community breathed free again, when they returned their verdict of "guilty."

There is a moral in this case which should be treasured by all, especially by medical men: never give an opinion on a subject upon which you have little or no experience, especially when a cunning lawyer has a point to gain thereby. It is very plain to all that had the suspicion of the criminal's insanity rested upon any substantial basis, his counsel should, and doubtless would, have called upon the prosecuting attorney to unite in an investigation of the case. Instead of this, the whole idea was kept *sub rosa*, until the defence opened, and then it burst upon the community in surprise, especially when the two medical witnesses took the stand. Happily the moral storm which such a plea, if successful, would have raised, was averted.

It is due to these medical gentlemen to say, that, in spite of the public clamor, they still maintain, as honest men should, irrespective of consequences, their conviction of the unsoundness of mind of the prisoner, and a candid listener to their reasons cannot but see that they have some ground for the opinions they gave in court. It is alleged that on both the father's and mother's side there have been and are cases of confirmed lunacy in the family, which, taken in connection with his extravagantly wild and reckless course of life, and his stolid indifference to the consequences, form the basis of their conclusions. They had, as medical men, nothing whatever to do with the course pursued by the prisoner's counsel, nor were they called upon to shape their opinions in accordance with the wishes of either the prosecuting counsel or witnesses, and they reason now, that if their opinions had been the ground of an acquittal by the jury, blame could not attach to them, and society must provide for its own protection against further depredations of the same kind, but in what manner it is not for them to say. As medical men, it was their simple duty and privilege to give an opinion on the case, just as they would in any other. Whether that opinion is correct is a just matter of criticism, and there it must end.

THE ACADEMY OF MEDICINE

Has done itself the honor of raising, for the second time, to the office of President, that veteran in surgery, Dr. VALENTINE MOTT. Now past the allotted threescore and ten years, this unequalled master of the scalpel still bears as erect a figure, as healthful a countenance, a hand as steady, and an eye as strong as ever. He has lately tied the carotid artery for the forty-fourth time, in the living subject.

THE NEW YORK STATE MEDICAL SOCIETY

Will hold its first semi-centennial meeting in February, in Albany, when

a good time is fully expected. I shall endeavor to be on hand, and give your readers some accounts of the deeds done in the body, as well as in the spirit.

Respectfully,

J. GOTHAM, Jr., M. D.

LETTER FROM BOSTON.

Boston, December, 1856.

THERE are two medical journals in this city. Why, then, send one's thoughts abroad for publication? Well, there are things that one cannot say at home, you know. One has to be peculiarly tender in talking of home matters before folks; and then one's own people don't like to have you tell their deeds to them, be they good or bad.

MEDICAL JOURNALS IN BOSTON.

Two journals? Yes, we have two. The *Boston Medical and Surgical Journal*, which for many years was under the editorial management of Dr. J. V. C. Smith, changed hands a year or two since, and although he remained nominally editor, it was well understood here that Drs. Minot and Morland were, and were to be, the sole editors. It was said here that Clapp, the owner, was afraid to turn off his former editor, because he threatened to publish another journal at a less price, if he did. His courage, however, was at last raised to the proper point, and the change was made. The result of the change was the "*Medical World*." I can't say how much of a hole it has made in the subscription list of its predecessor, but it is seldom seen on the tables of the profession in Boston. Homœopathy, hydropathy, everything which can be called collateral humbugs and collateral sciences, gets admission to its columns. Dr. Smith has the ability to edit a journal. He is an indefatigably industrious man; but having early in his professional career taken a public office, the usual fate of good-natured politicians awaited him. It is hard to be an independent politician. To be an independent medical editor and a politician at the same time is an impossibility. The *Medical World* probably has but very few subscribers in Massachusetts, and will not be a long-lived periodical, unless the homœopaths or the Female College take it up. There are enough of the former in the United States to back it, and enough women in trowsers who can be convinced of the immorality of men midwives, to subscribe for a publication which will support them.

The *Journal*, in the meanwhile, pursues the even tenor of its way. I fear that the editors are not sufficiently independent of the publisher to allow everything to go in that they could wish. The profession in Boston do not support them as it ought to. The older practitioners here seldom write, and the younger ones were so long kept in wholesome fear of their seniors that

they are only beginning. The editors, however, are always courteous, and every one knows that they are able. Still, the *Journal* is rather wanting in the spice which should season a weekly paper.

HOSPITALS.

There is talk of a new hospital, and the profession have prepared a petition to the city government, setting forth the necessity. There is actually, in this city of one hundred and seventy thousand people, not a single public bed for lying-in women! There is a building called the Lying-in Hospital, but its doors have been closed for some two or three months. Some say want of funds shut it up, others say that there was a quarrel between one of its medical staff (for it had three physicians for fifty patients a year) and the ladies who visited it, which caused the closing up. Be this as it may, the nearest free lying-in bed is three miles down the harbor; a most excellent distance, when it is considered that Boston harbor sometimes freezes for four miles down.

Lying-in women are not the only ones for whom a hospital is wanted. The Massachusetts General Hospital is very hard to gain admission to. There are almost always applications for the admission of chronic cases, waiting for weeks a chance for admission. You can always see phthisis there, but the acute fevers seldom, unless one is placed in a bed belonging to some private individual.

The Boston Dispensary is becoming one of the useful institutions. It is a private charitable association. Many of our own physicians are said to have obtained a start there. For several years past the anxiety to obtain the situations fell away, because of the miserable plan of its organization, and men were sought for the places in vain. Dr. Lawrence, son of the late Amos Lawrence, took the matter in hand last year, and it has been entirely reorganized. There is now a central office, and a corps of physicians and surgeons attached, who will not fail to make it all that it should be; and I am much mistaken if, in ten years from this time, it will not be considered quite as valuable to the profession and the public as any hospital in the country. I do not know all the gentlemen who now are attached to it, but the names of Williams, Lyman, Slade, Blake, Stone, and others well known in Boston, will become well known to the country in due time.

In addition to these, there is a class of ward physicians, younger men, who make visits to patients at their houses. The former receive no pay for their services, the latter have one hundred dollars a year each. The average income of a physician's first year is, ordinarily, no more than that. It will therefore be the means of encouragement to many a young man whose means are small, and whose determination to succeed is strong.

This does not make up for the want of a new hospital. The poor who can support themselves should be found the means of support; those who cannot the public ought to take care of, and the sick poor are certainly of the latter class. The filling of our almshouses and hospitals with the lazy, has been the means of immense suffering to the worthy. It is not a disgrace to be

poor. It ought not to be thought so, and if there was more attention paid by the public purse to the relief of misfortune, instead of leaving it to private charity, idleness would not so often receive the reward which should be given to those who are willing, but have not the means.

EYE AND EAR INFIRMARY.

The Eye and Ear Infirmary is another of our private establishments for the relief of distress. Why this and the Dispensary have not been taken up as a means of educating physicians long since, no one can tell. But we have really no clinical institution in Boston, which amounts to a tithe of what Boston could produce. The result is that Boston students are running off to New York and Philadelphia for want of home education. Perhaps at a future day you will learn why medical schools do not flourish in this city, where all other educational projects succeed, and where the means are abundant, nothing being wanted but the proper management.

MEDICAL SOCIETIES.

The medical societies here are active in their way. There are three of them. First on the list is the Suffolk District Medical Society. I say *first*, because it is the society to which all the regular physicians belong. It is a branch of the State Society. Its officers are a President, who is *ex-officio* a Vice-President of the State Society, a Vice-President, Secretary, and Treasurer.

Meetings are held on the last Saturday evening of each month, at which papers are read, cases reported, and discussions had upon medical topics. The meetings are usually dull, because there are one or two gentlemen who occupy most of the time in matters peculiarly interesting to themselves. Once or twice within the last year, the hours have been occupied in listening to the complaints of a single member of the profession, who seems to have an idea that he is persecuted, although no one knows why, nor how.

Two or three times a year there are stated meetings for police business, elections, &c. They occasionally have tried members for mala praxis. There is no very great chance, however, of any one's being convicted, the offenders bullying the members into not voting. Two members only have ever been expelled, so far as I can learn. One of these had already become known unfavorably to our courts, and the other made a defence too feeble to save him.

The principal medical transactions are by the other two societies, both somewhat aristocratic in their management. Their mode of electing members is not known to the profession at large. The older of these is the Boston Society for Medical Improvement. It has a large and exceedingly valuable pathological museum, collected mostly, I believe, by Dr. J. B. S. Jackson, whose fame as a pathologist is not confined to Massachusetts. They meet on the second and fourth Mondays in each month. What business they do can be easily seen in the *Boston Medical and Surgical Journal*.

You will see by its columns that many of the older and more distinguished of the profession are on the roll of members.

The other society is the Society for Medical Observation. They say that this society is peculiar in its work. Papers are read by the members in turn, and dissected without much regard to the feelings of writers by the audience. Few men are willing to brave the criticisms to which they are likely to be exposed, and consequently applications are not likely to be numerous for membership. Still, no one who is not a member of either of these societies can tell much about them, except that they are both very hard to get into.

I forgot to mention that the latter society has a valuable library of journals, which are distributed among the members, and passed from hand to hand in regular order. Their bound volumes stand in the hall, which is occupied by the three societies, and of themselves are a standing inducement to medical men to join.

There is also in Boston a College of Pharmacy. When they meet I cannot tell, nor whether they do much. There is so much bad physic in the world, that the services of this college are needed. It is no difficult matter to become a member. The being a gentleman seems to be a sufficient qualification; for there are among them those who have hardly any other. But this association is young, and the formation of it shows that the druggists are alive to a sense of their own deficiencies.

At some future day, I may give some slight account of the druggists, and (I trust they will pardon me for speaking of them in the same sentence) of the quackery of Boston.

STUDENT.

Boston, Jan. 9, 1857.

HEALTH OF BOSTON.

Boston, for some reason or other, has not been a very profitable home for physicians for the past few years. Whether this is to be attributed to the increased supply of pure water, or whether there is a periodical increase of disease and a return to health, and that we have been at the return swing of the pendulum for a few years, I cannot say. It is evident, however, that Boston has enjoyed an immunity from disease, that is not likely always to last.

SCARLET FEVER.

The daily papers will tell you that scarlet fever has been making terrible ravages this season. This is true, to a certain extent. So true is it, that if we should have as many cases of yellow fever as there have been deaths, in some weeks, from scarlet fever, the city would be deserted by a very large proportion of its inhabitants. And yet the former, almost every physician feels confident, is non-contagious, the latter eminently contagious.

Scarlet fever has not been so violent, nor so common, as is generally

imagined. There are physicians who have hardly seen one case a month during the last year, while in active and extensive practice. Others have been constantly occupied with the cure of it, their cases numbering, it is said, more than one hundred each. The cause for this difference is to be sought in the class of business. Through the summer, it is my impression, that the fever was confined to the lower Irish and German population. From the middle of July to the first of September, was the vacation of the public schools, and there was little intercourse between these and the American children. During these weeks, a large number of those children, whose parents are able to bear the expense, are in the practice of leaving the city. From the first of October, the fever began to spread in the schools, and, as the season went on, it was more common among the children of American parents. The deaths have never been excessive among the latter. Greater cleanliness, better ventilation, and more careful attention to the prescriptions of medical attendants, are a sufficient explanation.

There is no prevailing system of treatment of scarlet fever in Boston. All the remedies possible, from mercurials to cold effusion, are in vogue, including anointing, by one gentleman, with cold cream, and another with olive oil, and from this through the various greases to bacon rind.

HOMŒOPATHY AND BELLADONNA.

The homœopaths, during the fall and winter, have been harvesting. The dread of parents is so great, that they are willing to try any prophylactic, and many a child is supposed to owe its life to belladonna, who never was exposed to the disease. At last some of the apothecaries have caught the alarm, and fearful lest some other purses than their own should be filled, and willing to pander to the fears of the parents, have displayed ounce vials filled with something which looks marvellously like distilled water, but is labelled "Belladonna." Why not?

The homœopaths have a way of calling everything scarlet fever, which is attended with redness of the skin, and even a sore throat, which has no such complication, passes for this disease. They are not all guilty of deception in this matter, for the greater number of homœopathic practitioners are totally unable to distinguish between different diseases. Did it ever occur to you, my dear Doctor, to count up the number of men who were able to get a living by regular practice, who had deserted it for homœopathy? Are they not usually the men who have failed in the practice of medicine, and adopted the practice of this peculiar form of quackery, on account of its gentility? Thomsonism, the quackery of the kitchen, requires too much labor, and some little knowledge. Homœopathy, the quackery of the parlor, requires no previous education, because, if honestly practised, it never does any immediate mischief.

Did you ever know any thoroughly educated physician in your State, who, whatever his poverty might be, took up the practice? If you ever did, was he a man whose judgment or candor in other matters was at all to be relied on? I never heard of one.

This is rather aside from scarlet fever and belladonna. The Female Orphan Asylum in this city is said to have been sensibly afflicted during this season. Stories of numerous coffins carried in by night have horrified the timid, and horrid pictures in the air have been drawn by the tongues of the marvellous. The truth is, I learn from good authority, that one-fourth of the children, less than thirty, have had the disease. All of these had it mildly, but one, who died. What an opportunity for testing belladonna! Softly. Belladonna was tried upon every child in this same house, years ago, as a prophylactic. The number exposed was the same as this year. The number who took the fever was the same. The number of deaths was the same. Moreover, the epidemic was not so common outside the walls as this year.

"PRIVATE AND CONFIDENTIAL." TRALL'S CIRCULAR.

While I was visiting, this evening, a circular was brought to my door, headed "Private and Confidential." Now, on Paddy's plan, that not being able to keep a secret, he would tell it to some one who could, I shall let you know what it is. One J. Silas Brown, "agent for Boston and vicinity," has requested me, *confidentially* of course, to act as his *deputy* agent, he being the agent of one R. T. Trall, M.D. (so says the principal circular), of 15 Laight St., New York. I presume that Dr. Trall is one of the distinguished men of New York, although I never heard of him before. Of course that only "argues myself unknown." The object of the agency is primarily to collect statistics upon the production of sex at pleasure; secondarily and really, to inform the profession that he has discovered a method of preventing pregnancy. The circular is, in fact, one of those filthy advertisements, probably intended to fall into the hands of those who make a business of seduction, and a trade in female virtue. It would not be worth one's while to allude to this circular, but that certain physicians in Boston, having the desire to investigate the electro-chemical baths, rather patronized this J. Silas Brown, who keeps some of the tubs in Lagrange Place. As these gentlemen stand well in the profession, perhaps they may be pleased at being asked to act as his agents. The price of the precious knowledge is only \$100, "one-half of which will be abated, on the presentation of satisfactory evidence that the party is really poor." There is no information as to whether clergymen are informed gratis; but, to make the thing take with the public, in other words, to make it cocksure, this should not have been omitted.

THE INFLUENCE OF FASHION ON SURGERY.

We are in the midst of winter, and cold it is even for winter. The Metropolitan Railroad, which runs its horse cars through the main street of Boston, will doubtless have its effect on our profession. The inability of the drivers to turn out obliges the passers-by to keep to the right, as they should. There are fewer omnibuses to cross from side to side depositing passengers—consequently the streets are less often blocked, and accidents less frequent. Every one knows how the practice of surgery has been influenced, at times, by the fashion of dress. High side-pockets in the great coats were attended

with fractures of the olecranon. When the pockets came down, so did the fractures, and the radius and ulna were the endangered bones. If, with the former, the humerus was oftener dislocated, with the latter the forearm bore the brunt of the blow. Why may not the introduction of horse railroads produce an entire revolution of fashion, in the style of accidents? Tight lacing, our elders tell us, produced deformity of chest and cough. Heavy skirts, tied about the body, released the chest to a certain extent, but the effect was seen in the abdominal organs, and various uterine displacements and discharges followed. Who can foresee the sequel of crinoline? Is it to be rheumatism or neuralgia? diarrhoea or constipation? dysuria or metritis?

How many cases of amaurosis will little bonnets produce? Or is iritis to be the fashion? Verily, civilized life has its ills.

FORTHCOMING WORKS BY DR. DURKEE AND CHANNING.

It is announced that Dr. Durkee, of this city, is about publishing a work on venereal diseases. I believe he claims to have some new views to bring forward on the subject.

• The Boston practitioners have not been before the public much, as book-makers. Two or three ex-professors in the Massachusetts Medical College have collected their papers from journals, and have given them to the world in duodecimos; but no treatises of any length have appeared. It is generally believed that Dr. Walter Channing has a work in hand, the result of some forty years' experience in his specialty. Whatever it may be, every one believes it will contain a large number of facts, and that at any rate it will be readable.

Yours truly,

STUDENT.

SUMMARY DEPARTMENT.

Veratrum Viride.—We have, on several occasions, spoken of this article as an arterial sedative. Proofs of its efficacy seem to be constantly accumulating, though we regret to see that Dr. Norwood, who has the merit of recalling the attention of the profession to it, seems to be trying to impress the idea upon the profession that no one can make the tincture as well as he can.

Dr. C. K. Winston, of Nashville, Tenn., says of it, in the *Nashville Journal of Medicine and Surgery*: It is peculiarly adapted to the treatment of pleurisy, pneumonia, rheumatism, and bronchitis. In these diseases, if its advocates are not mistaken, it is almost as effective as quinine in malarial fevers. And in the phlegmasia generally it is regarded as more or less valuable. In all conditions to which it is applicable, much will depend on the time in each case at which its use has been commenced. If deferred until actual organic lesion has supervened, its benefits are equivocal, or at least not so obviously curative as when given at an earlier stage. Dr. W. also suggests that it is not so valuable in the treatment of inflammatory diseases arising from a specific virus.

The preparation generally used is the tincture. Dr. Norwood's formula being as follows:—

R.—Root of *veratrum viride*, dried, 8 ozs.

Alcohol of the shops, undiluted, 16 ozs.

Macerate from ten days to two weeks. Dr. Winston gives it in the dose of from five to six drops, in a little water, every two or three hours, increasing two or three drops upon each repetition, until some of the characteristic physiological effects are produced. It is then to be withdrawn, until all the characteristic effects pass off, which will ordinarily occur at the end of eight or ten hours. It may then be resumed, if necessary. The most remarkable, and at the same time, the most important physiological effect of *veratrum viride*, is the reduction of the heart's action, and that, too, with entire safety, so far as Dr. W. is informed, to the patient. The pulse may be reduced by it from 130 to 40 beats in the minute with entire safety to the patient, and without the least injury to the circulatory or nervous system.

Several peculiarities in the effects of the *veratrum*, though but partially sustained by experience, have been suggested. First, that it does not act so promptly upon children as adult subjects, or at least that a larger comparative dose is required to produce a given effect, and that it is less apt to excite nausea. Second, that it is not applicable in inflammatory disease when there is sickness at the stomach. Third, that it is an abortive. This last point, first suggested, Dr. W. believes, by Dr. Brown, of Georgia, deserves special

attention. He says that abortion does not follow immediately upon its use, but that after the lapse of a few days it is sure to follow. If this be true, it is of the highest importance that it should be known. Upon the first view, on account of its powerful influence on the circulation, it may seem philosophic, but when it is remembered that the foetal circulation is but slightly, if at all, affected by any disturbance of the maternal, no special reason appears why it should prove abortive, and the fact remains to be established by experience. The testimony of many practitioners of the South fails, however, to bear out Dr. Brown's observation.

Dr. W. is of opinion that no remedy of the materia medica of like powers is, by any means, so free from danger. He publishes several cases confirmatory of his observations on the therapeutic effects of the remedy.

Removal of Milk from the Breast.—Mr. Gibbon, in the *Lancet*, recommends the application of belladonna to the mammae as an excellent means of checking the secretion of milk. With a lotion, consisting of half a drachm of extract of belladonna to half a pint of water, he has succeeded in arresting the secretion in three protracted cases, where a variety of expedients had failed.

Vaccination.—J. F. Marston, Esq., Surgeon to the London Smallpox Hospital, says that he has never seen any evil results traceable to vaccination, with the exception of a single instance, in which measles occurred at the same time, and four or five examples of rather severe sore arms, arising from lymph recently taken from the cow.—*Boston Med. and Surg. Journal*.

Laceration of the Cornea of both Eyes during a Convulsion, with Paralysis of Left Arm.—Dr. J. W. McKinney, of New Albany, Illinois, relates in the *N. W. Med. and Surg. Journal* a singular result of a convulsion, viz: the laceration of the corneas of both eyes in a little girl three years old, who had been suffering for several days from a mild attack of tertian intermittent. The patient was first seen on Saturday morning, April 19, 1856. There was nothing peculiar in the symptoms beyond that of ordinary convulsions of children to attract attention, except the coma, which appeared to be of a deeper lethargic character than common. A prompt and effective treatment was resorted to, but the deep coma continued, and it was with difficulty that the patient could be aroused so as to swallow anything put into her mouth. On the morning of the 20th, on examining the eyes, the laceration of the cornea was discovered. The lacerations were both transverse, pointing to the outer and inner canthus, and just below the lower border of the pupils, presenting smooth edges, as though they had been cut by a sharp instrument. The rent in the left eye extended entirely across the cornea, while that of the right extended from the inner border of the cornea, only about two-thirds across its diameter. The eyes were slightly flattened in front, from the escape of a portion of the aqueous humor through the rent, which imparted a dim, contracted appearance, to the sound portions of the cornea. Acute inflammation of the conjunctiva of the left eye was set up, radiating from the two extreme points of the laceration.

Together with all this there was complete paralysis of the left arm—an evidence of a more serious lesion in the brain and nerve-centre.

Treatment was unavailing, and the little unfortunate sufferer continued gradually to sink into a deeper lethargy, which terminated fatally on the fourth day from the convulsive struggle.

A few hours previous to death, the remaining portion of the aqueous humor of the left eye flowed out through the rent in the cornea.

Unfortunately, a *post-mortem* examination was not allowed.

Cephalalgia.—M. Boilleau (*Pharm. Journ.*), in an obstinate case of *cephalgia*, used hydrochlorate of morphia, dissolved in a strong infusion of coffee successfully. The attacks occurred especially on any exposure of the head to the cold air, and had resisted the operation of each of these remedies separately. It ceased almost immediately after taking them in continuation, and by repeating the dose on each recurrence of the pain, the attacks became less frequent, and at length disappeared. M. Boilleau has found it successful in many other instances.—*Brit. and For. Med. Chirurg. Review*.

In the *Charleston Medical Journal* (Sept., 1856), Dr. G. W. Arnett, of Baseir Parish, La., after referring to Boilleau's experience, says, he has used in the same disease the citrate of caffein and the sulphate of morphia more successfully than any remedy he has seen tried. He has also used it with more relief than from any other *one* remedy in nervous headache, hysteria, and a few other diseases of a similar character. His average prescription would be about as follows:—

R.—Morph. sulph. gr. $\frac{1}{2}$;
Caffein,
Acid. citric., ss gr. ij .—M.

To be given in warm coffee, or, what is better, in a decoction of *rad. senegæ*. In the majority of cases, the caffein and citric acid will relieve nervous irritation without the addition of the morphia, which is a desideratum when the bowels are constipated. It acts powerfully on the skin, equalizes the circulation, and thereby removes local congestion.

Scarlatina treated with Oil of Turpentine.—Dr. J. S. Collings, of Boxley, Ind., in the *Northwestern Med. and Surg. Journal*, says: "I have recently had many cases of scarlet fever. In treating them, I used internally oil of turpentine one part, sweet spirits of nitre two parts, of which I give 15 or 20 drops to a child two years old, while the fever remains high, repeating it every two hours. I also apply externally to the throat an equal mixture of volatile liniment and oil of turpentine until the surface is nearly blistered. If ulceration of the throat takes place, I apply diluted oil of turpentine internally. It (the turpentine) is the best remedy I have ever found for scarlet fever. If the pulse was very quick and the fever high, by giving it freely for twelve hours, the turpentine would reduce both very promptly. If it will

only succeed in the hands of others as it has in mine, scarlet fever will be no more difficult to manage than the chills are with quinine. Please give it a trial."

Anæsthesia, an Old Affair.—In Middleton's tragedy of "Women, beware, Women," published in 1667, there is the following passage:—

"I'll imitate the pities of old surgeons
To this lost limb, who, ere they show their art,
Cast one asleep; then—cut the diseased part."

The *Virginia Medical Journal* copies the above citation from a newspaper, and expresses some doubt of its accuracy, as Thomas Middleton, the dramatist, was a contemporary of Fletcher and Massinger, and must have died long before 1667. Can any of our readers enlighten us as to the correctness of the quotation? We have taken some pains to find it, but without success.

Local Anæsthesia.—A dentist of Galena announces, through the newspapers of that city, that he has discovered a new agent for the production of local anæsthesia. The whole thing, however, smacks so much of humbug, that we regard it as a villainous, and, probably, a successful attempt to fill his office with patients—a convincing proof that he had not *merit* sufficient to do it.

Two newspapers of Galena characteristically swallowed the bait, and, we are sorry to say, that certainly one of our dental and one of our medical exchanges have given it currency as an important discovery.

The Drug Market. (From our own Reporter).—Pills, with us, have a downward tendency. Dealers in opium are rather sleepy and quiet. Ipecac and tartrate of antimony are decidedly upward. Dealers in snake-root are squirming about a good deal recently, since the Silver Lake serpent came before the public, fearing lest the article become a drug in the market, the Pennsylvania serpentaria having the advantage of being easily swallowed by all believers in the marvellous. Those having Dover's powder in large quantities sweat at every pore, and many are sick of the business.—*Medical Advertiser.*

Louisville Medical College Burnt.—The Louisville papers inform us that the building belonging to the Medical Department of the University of Louisville was entirely destroyed by fire on the morning of the 31st ultimo. The fire seems to have been the result of accident. Only about half of the library, which contained many valuable works, was saved. The chemical apparatus was more fortunate, and about two-thirds of it was saved. The *Louisville Courier* says:—

"The greatest loss, and one which is, perhaps, irreparable, is the collections of natural history and those illustrative of anatomy and physiology, in which last the museum was very rich. It will cost many years' labor to replace the beautiful specimens of shells, corals, mastodon bones, and human bones which adorned the cases of the museum.

"The chemical laboratory was one of the most extensive and complete, if

not the very best, in the West. Its value could not be estimated at less than twenty thousand dollars.

"The Medical College was a very large, substantial building, which, together with its valuable contents, involves a loss of fully \$50,000 upon the University. The building may be considered as a total loss, as nothing is left standing but a portion of the walls and dissecting-room. From ten thousand to twelve thousand dollars' worth of apparatus, material, and library were saved. Insurance to the amount of only \$37,000 was effected on the building and contents.

"The professors, despite their heavy loss in many departments, will still continue the lectures; and it is confidently intended to make the new building and its apartments more than equal to the old one."

Sore Nipples.—The following we find recommended in one of our exchanges: R.—Ext. opii gr. j; Liq. calcis, Ol. amygdal., aa fʒijj.—M. Dip a piece of lint in the mixture and apply to the affected part.

In our own experience a solution of tannic acid in its own weight of glycerin, has given great satisfaction. The objection to it is the difficulty of cleansing the nipple from so concentrated an astringent solution, sufficiently to avoid its constipating effect on the infant. Aside from this objection, we can highly recommend the application.

Cephalalgia—cured or caused?—The following is recommended in cephalalgia, facial neuralgia, &c. We copy it as a specimen of the careless manner in which prescriptions are sometimes written. We will not insure the reader against an attack of cephalalgia while trying to decipher it!

| | |
|--|-----------|
| "Quin. sulph., dissolved in spirits of wine, | grs. xij; |
| Ferri oxyd. | grs. xij; |
| Succ. liquirit. | ʒss. |

In pil. 24, taking one or two every hour."

SELECTIONS.

Low Fees and No Fees for Medical Services.—MR. EDITOR: I have for some time been thinking over the subject matter of the present communication, and propose now to offer you some plain words upon an important subject. It has grown into a principle in the profession, that it is derogatory for physicians to talk of their compensation, for fear they shall be considered venal and mercenary; and so exquisite has this feeling become, that these men suffer themselves to be cheated of their honest dues, to be bamboozled and circumvented in all manner of ways, for opinions and advice, so that no pay can be asked. They are assailed in the streets for advice; they are beset on all occasions in their daily rounds of business for directions and recipes, when no compensation is offered, and, according to common etiquette, none can be asked. The amount of such gratuitous prescribing becomes large in the experience of every physician, and in a lifetime it would be a comfortable competence to a man's declining years. It, however, gets even poor thanks, for it seems to follow in the public mind as a matter of course. You must be the servants of servants; you must listen to long yarns, and get rid of your troublesome patrons by a gratuitous prescription; your time and talents be frittered away upon gossiping, long-winded, and self-complacent patients, who are shrewd enough to use you without any cost to themselves. And then, when we can charge, the rates are so ruinously low, in these times of famine prices especially, that it is with difficulty that physicians can live. No one can have failed to see that the medical profession in New Hampshire is at the present time greatly depressed—that this class of persons are struggling hard for their bread. Indeed, the prices of charging are not higher than they were forty years ago, while the community require of us far better qualifications and skill, and do not excuse the slightest leniency, but pounce upon us with all fury if perchance a deformity happens to any of our surgical cases. I speak more particularly of the country towns, where there have been no changes in the rate of charging, while I am aware that in the cities and some of the important villages in the State the rate has been partially increased. The profession is not, indeed, as lucrative as it was twenty years since. Various causes have conspired to produce this state of things. The multiplicity of nostrums has been unfavorable to the physician. Some of these vile compounds have been substitutes where the physician used to be called; the patient lives through it, as he is pretty likely to do, and after a while he gets well, or what he calls well, with often some chronic inflammation remaining, or with the reliefs of disease that nature could not quite carry off, or other affections, half subdued, that trouble him for years. This is the great crying evil of our times, and our communities are using these base nostrums to their great injury. Better, far better, were an entire scepticism in regard to medicine, than this common and indiscriminate drugging.

The income of the physician is also somewhat diminished by the great multiplicity of drug-shops that has taken place of late. In our country places these are pretty poor concerns. The druggist is generally green, without having had any preparatory training for his business; and you would as soon trust a prescription in the hands of a child as in his. His medicines, of course, are poor enough; you find his shop but little convenience; you dare not use any of the chemicals he sells, and as for other articles, you buy only what your eyes and taste indicate to be pure. And then his shop is full of every abomination of patent medicine that can be called for, all arrayed in the most

imposing form to catch the eye, and the sale of this stuff constitutes a good part of his business. And further, this druggist, green and ignorant as he is, like all the rest of the world, is ready on all occasions to prescribe, and thus he gets off his medicine and preparations, to the injury of the physician. Some of the irregular practitioners, as the homœopaths, hydropaths, and other quacks, break in upon your practice, and often take off good families. You have nothing to do but to submit to these egregious follies, and wait till some emergency shows the worthlessness of all their things, when you will be importuned to step in and try to avert the consequence of delay, of error, and actual delinquency.

I ought not to omit to mention the injury to the profession occasioned by the withdrawal of so many persons in every town and part of the State from the care of the profession, and putting themselves under the treatment of such quacks as Fitch, Hunter, and a host of others. These men prescribe without ever seeing their patients. They usually publish a book upon the branch or specialty they pretend to practise, which is written with great art, and often with much ability, for money can command almost any kind of talent; these are sent to all invalids, and they are sure to find among the cases of recovery detailed here, some one exactly like their own. These invalids, to whom little or no hope can be offered by the scientific physician, who has a conscience, are here assured that they can get well, if they will only send them an account of their symptoms, together with the money for their medicines. The express of our country carries the worthless nostrums of Fitch to every nook and corner in New England, the pay always being in advance! And so with the inhaling tribe; they will put a patient through a course of a month for twenty-five dollars in advance! The number is said to be large, that doctor, as it is called, through pulmonary tuberculosis and other diseases with these quacks, entirely by a correspondence of themselves or their friends. These empirics keep some one in their establishment, to do their correspondence; and these poor, deluded patients, who imagine that they are holding a very frequent and particular correspondence with Fitch, Hunter, &c., are receiving nice and feeling responses, in relation to their complaints and the management, by a mere understrapper hired for this purpose. This has already grown to be a great evil, and immense sums are sent every year from our State to swell the coffers of these heartless quacks, while better men are languishing at home, and not employed, because they cannot like them delude and deceive their patients.

All the follies and absurdities enacted by mesmerism, by any of the tricks of clairvoyance, or spiritualism, need hardly be mentioned. They are perhaps more humiliating to the physician than injurious. They keep the public mind in an unsettled state, and put many a sufferer out of the pale of relief, by this absurd dependence on what will fail them in the hour of need. It is only bad that so many fair and well-meaning people are pursuing a phantom, and are involved in such mists and fogs as rarely ever to find their way out.

The profession, too, act as though their services were not to be reckoned in dollars and cents; and the people gladly take it so, giving little heed or credit to the high principles and disinterested conduct that prompt such a course. It is considered fair game, on all hands, to get as much out of physicians as possible without pay. One asks what he shall do for a cough; another would be relieved of a severe rheumatic or neuralgic pain; another desires some suitable prescription for a diarrhœa, &c.; and all in times and places to preclude the idea of paying for it. So that the physician makes his highway prescription, his street prescription, and thousands of others, where no pay can come. The lawyer asks a fee for his advice; you, by common consent, can ask none.

Then as to the prices he asks, when he can charge, they are ruinously low. In some places, I have known all the business of a village done at two shillings a visit, and medicine found, and some of these patients visited from

one-half to three-fourths of a mile; and perhaps a fourth or fifth of them never paid, and what is paid is delayed a year or two, or till the patient can urge upon you some article of produce at the highest price and of the meanest quality. If you should ride two miles, you can charge from fifty-eight to sixty-seven cents, finding medicine; three miles, seventy-five cents; and four or five miles, from five shillings to a dollar. As bad as this is, I know a physician who rides four miles for half a dollar, and who made a visit in consultation, at the distance of nine miles, and only charged a dollar! He was formerly in the habit of charging thirty cents a visit in his own village! Now, village visits at fifty cents are lower than any other services rendered the community; a farrier would be considered very cheap for any prices like this, and yet to the educated and well-trained physician this small sum is grudgingly allotted.

Office prescriptions are proportionably low. I have often known them made for twenty-five cents, with a careful examination and medicine. Indeed, so has it grown to be an established fact that the physician must not charge unless he gives medicine; his opinions must be gratis, like the quacks', who advertise to give advice gratis—and, Lord, what advice!—but make the people pay dearly for worthless nostrums.

In regard to the pay, when there is any pay at all, it is better than it was formerly, for the physician is now sometimes paid like other people. It is a settled practice, however, in the community, when individuals are making their appropriations to pay their debts, the physician's bill is the last to be provided for, and without any "compunctious ventings of nature" it is laid over till another year, or till it is perfectly convenient to pay it. Then it may go year after year without interest; and the poor means of the physician are thus frittered away, and he just able to make the two ends of the year meet. It is not a debt that lies heavy on any man's conscience; it is nothing but doctoring. They know that the doctor will be quiet—that he will not even dun them when thus delinquent, for they hold over him the fear that they will desert him, or go over to his competitor; than which, he had rather give them his bill, and another year's doctoring to boot. It is this miserable subserviency that induces such treatment. They seem to forget that they might about as well lose such patrons, who are so loth to pay, and so very annoying and overbearing; they cost more than they are worth. The workman is worthy of his hire. The physician is wanting in duty to himself, to let men thus trample on his rights.

I have thus spoken of some of the circumstances that, at the present time, tend to depress the medical profession in New Hampshire. I know that it will be said that it has lost the confidence of the community; it should rather be said that physicians have become too matter-of-fact men for the people; they have too much discarded the marvellous, the almost supernatural, and speak in plain English, both in the names of disease and the medical matters discussed, as they would of any other subject. Well-educated men cannot minister to this depraved taste, and then persons go where they get their credulity and marvellousness gratified. I can only say that we prefer to be *men*, though we are certain to remain poor, to that of being rich as Croesus, having thereby made shipwreck of our honor, integrity, and conscience.—*HIPPOCRATES*.—*N. H. Journ. of Med.*

Medical Ethics in Virginia.—The *Virginia Medical Journal* quotes from a country correspondent as follows:—

"Medicine is a noble and honorable science, and its votaries ought to be honorable men; but it is a lamentable fact that in this our day there are many who, for the sake of gain, will stoop to anything, no matter how contrary to the rules of the profession; who peddle out their practice like the Jew his merchandise, for as low as one-tenth its real value, merely for the sake of custom.

"The following will exemplify this:—

"There are in my immediate vicinity two or three physicians who make it their business to go about trying to engage families or individuals by the year. If they cannot get them for one price, they will for another. Their object is to get the practice, no matter how unfair or unprofessional the means. They go to families, and insist that they should employ them by the year, as it will be so much cheaper for them to do so. One of them says to those who do not employ a physician in this way, 'Send for me anyhow whenever any of you get sick, and pay me what you please. I am a young man; it does not take much to support me.' He approaches a blacksmith with about four in family in all, and a wife who expects to be confined in two or three months, in this manner: 'How much will you charge me for shoeing my horse by the year?' 'Eight dollars,' is the reply. 'Well,' says the doctor, 'and I will practise in your family by the year for three dollars and a half.' The blacksmith thinks it certainly cheap enough, and engages him. This is the minimum price per family, and ten dollars is the maximum, so far as I have been able to learn. They engage to cure syphilis for from three to five dollars, if it can be done without much trouble; at least, one of them does it. I have it from his own lips. Gonorrhœa is treated for five dollars; bleeding, cupping, blistering, extracting teeth, &c., are done gratis; and they pretend to charge nothing for prescriptions and medicines.

"Now, I ask, in the name of reason and justice, is this to be borne with? Is it not degrading and humiliating, and should not these persons be driven from the practice by the united efforts of every honorable man?

"I have been told by some, if I made any ado or complaint about their low charges and unprofessional conduct, it would be the means of permanently securing to them the entire practice. So let it be. I intend to oppose every species of quackery, no matter from what source it may come, 'sink or swim'; and if every honorable member of the profession would do the same, we would soon be purged of all those who could stoop to anything which is professionally dishonorable.

"I do hope the practitioners of Virginia will get into the spirit of forming themselves into societies throughout the entire State, adopting the code of ethics of the Medical Society, and strictly living up to its requirements, thereby placing every man's success upon his individual merits, and also enabling them to exert the whole moral influence of the profession to force these false brethren from their disloyal and underhanded dealings."

How unutterably degraded must our once elevated calling have become in the estimation of the public, who witness such acts as are described by our indignant correspondent, and how absolutely necessary to the honor and to the interest of the profession, that all such offenders should be visited with the indignation and contempt of the entire fraternity. In the absence of all legislative enactments for our protection, which can never be expected from a government like ours, we have nothing to look to but the associated force of a united profession, bound firmly together by a common interest, and prepared to act with decision and energy against all who violate those rules adopted by the wisest and most experienced of the profession, as "the expression of the great principles of truth, justice, and honor, in their application to the relations of physicians to one another, their patients, and the public."

Fees.—All things save doctor's bills have gone up. In most places these have remained stationary since a time the memory of man runneth not to the contrary. The fee bill here was established a quarter of a century ago, when

one dollar was worth more than five dollars at present, so that the remuneration of our fathers was fivefold higher than that of their professional children. The question has, therefore, now to be agitated, What further depreciation in the price of dollars—physicians' fees remaining nominally the same—is necessary to insure the failure of the proceeds of a large practice to meet the absolute necessary current expenses of a practitioner? Whether, indeed, that time has not already arrived is a matter for the brotherhood to determine. We are fully aware of the difficulties connected with an effort to change established usage, particularly in the absence of the great argument that the change will put money in the people's pockets. The people are slow to believe that any change will redound to their benefit; and history teaches that this reluctance is founded in the world's experience, that change of usage, while it may benefit the few, is prejudicial to the masses. People bear tyranny of government as long as labor secures support, but when it sinks them below this plane, tyranny and tyrants are swallowed up in revolution, and a new government inaugurated. Industrial pursuits are regulated by the same law. When remuneration falls below the plane of support, strikes or miniature revolutions meet the evil, and a new era commences. The science of medicine applied in practice is neither more nor less than an industrial pursuit, politely veiled profession, and when its remuneration falls below the support of its followers, it is clear that they have no remedy but revolution.

We know not that such a crisis has arrived, but if it is not rapidly approaching we have read the indications of the times to little purpose. Dr. Johnson tells us that the government of one man, which in his day prevailed in all the nations of the earth, grew necessarily out of the fact of the absence of harmony and agreement among the people so governed. That could such harmony prevail for a day, in that very day monarchy would cease to exist. But that men were so constituted as to make it impossible for any such harmony of opinion ever to obtain, and consequently monarchy would be perpetual. Physicians are but people, and while the doctorate constitutes them one great family, they are not any more than the people, of which they are an integral portion, conspicuous for dwelling together in harmony. They are as obedient to their Ruler, Custom, as were ever any people to their sovereign, and for the same reason, the impossibility of agreeing among themselves. Could such harmony obtain, it is impossible to believe that they would not instantly, and by a single blow, demolish their tyrant. There are a thousand reasons for this want of harmony, none of which is it necessary to indicate; but we humbly beg to offer what we esteem a valid one why an effort should be made to attain it, at least long enough to enable them to elevate their fee bill to a living level. We have said that a physician is a man. He must eat and drink, and whether he be merry or not, must be clothed. If he have wife and children, they also must have shelter, food, and clothing. *They must have these things.* If they cannot be procured in the regular legitimate exercise of his calling, they must be procured notwithstanding. It follows then that when *regularity* fails, *irregularity*, clad in the habiliments of hope, offers a temptation fearfully alluring. Against her seductive wiles no physician, however armed himself, should feel satisfied until his brother is also armed. What strikes down one injures all. We would not that any should be lost. Many are pecuniarily above the effects of ill-requited labor. Many are not. Shall the former fold their arms in apathetic security while the latter suffer? Shall any *practising* physician say, "I am independent; I can live, pay or no pay?" No. He dare not, if he be a physician and acknowledge a brotherhood; for if his brother is dependent, so also is he dependent, for his brother is a part of himself. Moreover, if he work for nothing, because he can afford it, *he is a robber.* Worse, for while ordinary thieves are true to each other he robs a brother.

But we will not pursue this unpleasant theme. We think our brethren are too poorly paid, and we have thought proper to say what we thought. But

the remedy is in their hands, which is more than they can say of the ills they are daily and nightly called to combat.—*Nashville Medical and Surgical Journal*.

Treatment of Neuralgia by the Valerianate of Ammonia.—Dr. DECLAT relates, in the *Bulletin de Thérapeutique*, several cases which prove the happy effects that may be anticipated from the use of the above remedy.

CASE I.—Madame the Marchioness of Fontanelle [the lady has authorized us to give her name], was attacked six years ago with facial neuralgia of the most severe description. The pain was first experienced while cutting a wisdom tooth, which was late in making its appearance. As this tooth came through in a wrong direction, Drs. A. Legrand and Jobert de Lamballe ordered its extraction. The pain was so violent that Madame de Fontanelle was unable to open her mouth, and they were obliged to give her chloroform.

In presence of the consulting physicians, Mr. Evans performed the operation of extraction with great skill. After the removal of the tooth the neuralgia still continued. All the ordinary means were employed to relieve it; internally, sulphate of quinine, opium, belladonna, sulphate of strychnia, iron, gold, and quinquina, were administered, as well as external applications of opium plaster, blisters, morphia, dulcamara, chloroform, collodion, aconite, &c. &c.

Professors Sedillot and Velpeau saw the patient without being able to give her any relief. Professor Jobert de Lamballe proposed and obtained permission to apply the actual cautery over the course of the inferior maxillary nerve. This treatment, so terrifying to a woman, slightly lessened the acuteness of the pain, but failed to overcome it; and though suffering less, Madame de Fontanelle could neither eat nor sleep; being compelled, during at least six months, to have recourse to nutritive enemata and tonic baths to preserve her health and life.

The waters of Plombières diminished, for a time, the frequency of the pains; during the second season no benefit was derived from their action; the third her malady was increased. She was in this suffering state, when, on the 19th December, 1855, she was placed under my care.

The amelioration of her complaint, produced by the waters of Plombières during the first season, determined me to use Fowler's solution.

The invalid consented the more willingly to this means as she preferred death, she said, to insanity from suffering. One of her friends, also, Madame de Balsac, had written to her from Germany, that this remedy was in frequent use in the country in which she lived, and that it had, to her knowledge, cured more than one case of neuralgia.

From the 19th to the 22d of December, 12 drops in the morning, 12 drops at noon, and 12 drops in the evening of the following mixture were given her: Fowler's solution $\frac{1}{4}$, mint water $\frac{1}{4}$.

On the 22d, there was a little improvement, but the tongue was red, and she suffered much pain in the stomach; Madame de Fontanelle would not consent to diminish the next dose, as the slight amelioration she had experienced made her sanguine of more complete relief.

On the 24th, vomiting, diarrhoea, cramps in the stomach and pains returned. We discontinued the medicine.

On the 3d of January, 1856, the agony was unendurable, and my patient was in despair. I tried the valerianate of ammonia.

A teaspoonful, taken in the evening, modified the pain at night, and rendered it bearable. Two teaspoonsful the next day gave complete relief.

On the 6th of January the patient could rise and speak.

On the 19th she half opened her mouth, and began to eat. The 3d of February, Madame de Fontanelle came up to me smilingly, and welcomed me, saying, "Doctor, I have been well enough to dine in town; I can laugh; in society they look upon me as one risen from the dead." We gradually in-

creased the dose to a dessert-spoonful morning and evening; the improvement now became so great that her countenance resumed an entirely different aspect, and her appetite came back as hope returned.

Finally, on the 6th of May, the pains having for several days entirely ceased, we suspended the use of the medicine. Several weeks passed without a single twinge; but at the return of the first pain the marchioness snatched the bottle and took a dose of the valerianate.

From time to time some shooting pains were felt; but every time the valerianate was resorted to they disappeared. The improvement continues, and there is nothing to cause us to anticipate that the remedy will lose its efficacy should the disease return.

The case given above is one of importance. From the first the patient had been attended with care, and even affection, by the most eminent physicians; for six years almost every known means had been employed, without results of any duration.

This case of neuralgia was much more obstinate and unmanageable from its being an hereditary affection. Madame de Fontanelle's mother had suffered fearfully from a similar neuralgia. Her brother, the Count of Essex (sic!), has had the *douloureux* from his youth; and he is as well known in England from the great suffering he has gone through from it as from his high position.

Dr. A. Legrand has, throughout, watched this cure, which he had pronounced hopeless six years ago; wishing himself to verify the value of the new medicine, he ordered it in the same doses to Madame de V——, whom he considered equally incurable. We know that the relief has been quite prompt; but we understand, from his having too rapidly increased the dose, that some cerebral disturbance was produced. These symptoms, however, disappeared as soon as the valerianate was given in proper doses. At present, Madame de V—— considers herself cured.

CASE II.—M. E. Letellier accompanied his wife to Plombières. During his sojourn at the waters, in the beginning of October, he was attacked with a pain in the head; this pain extended to the muscles of the neck, passed through the top of the head and lost itself in the branches of the facial nerve. It was impossible for the patient to raise his head from the pillow. Various remedies were tried at Plombières, but the pains increased, and the sufferer was taken back to Paris.

The least movement was so painful to him that he could only bear the journey by having his head supported by Madame Letellier's hands.

Dr. Louis tried blisters, sage, quinine, and morphia, without any effect. To relieve his pain, M. Letellier took so much morphia as to fall into an alarming state of torpor.

On the first of October, 1855, we found the sick man in a state of extreme agony; he had not taken any morphia for two days, and suffered constantly.

On the same day we began to use the valerianate of ammonia, two teaspoonfuls during the day in a half glass of *eau sucrée*. That night he had a little rest.

By continuing the use of the valerianate without increasing the dose, the patient was able to get up at the end of five days. On the ninth day he walked out to take a bath; he no longer felt any pain except in his neck and the back of his head; his nights became comfortable, his abilities and aptitude for business entirely restored.

Finally, from the 24th of the same month we discontinued our visits.

We met him again recently, and he tells us that he has had some slight twinges, which are at once dissipated by a spoonful of the valerianate.—*Le Revue Médicale Française et Étrangère and Medical Examiner*.

[We take the following paragraph from an article in the *American Journal of Insanity* for July, 1856. It was written for the *Opal*, a monthly published

by the inmates of the New York State Lunatic Asylum, by a young gentleman of talent and literary pursuits, an inmate of the asylum. We are sorry to be compelled to omit the writer's very graphic description of his own case.—ED. MED. AND SURG. REPORTER.]

Insanity.—My own Case.—Man, the most perfect and complicated in structure of all God's workmanship, is at the same time subject to the greatest number and variety of injurious agencies. This liability is, indeed, a natural consequence of the complexity of his organization. Possessed of a composite nature, in which the material and spiritual elements are strangely interblended and harmonized, he is at once subject to the imperfections and evils incident to both. Add to this the effect of highly artificial modes of life, by which nature seems crossed and thwarted at every turn, and of unnatural habits voluntarily contracted, which add insult to her injuries, and the passage from the cradle to the grave is like running a gauntlet of perils, from which it is really wonderful that so many escape unharmed.

"The ills which flesh is heir to" may be classified under three general heads: those diseases which attack the body exclusively; those which affect the mind exclusively; those which impair the connection between the mind and body, and hence are commonly called nervous. * * *

The most comprehensive classification, including all the varieties of mental imperfection and disease by which man is unfitted for the exercise of his powers as a rational being, would seem to be something thus: radical deficiency of intellect, which constitutes idiocy; total derangement of all the faculties of the mind, by which the mental equilibrium is entirely overthrown, and the intellect, moral sentiments, passions and appetites are thrown into a complete chaos of elements, in which the primal chaos of the material world was but a feeble type; excessive activity or predominance of some particular faculty, sentiment, or propensity, or the entire occupation of the mind by some leading subject of thought till the perceptive powers become distorted with regard to all objects connected with that object, while they remain correct on all others—this is insanity: disordered state of the nervous system, or the connecting medium between mind and body, which gives rise to hypochondria, optical illusion, and to which spectral appearances and ghosts stories are said to owe their paternity. * * *

Since the causes of insanity are usually of a mixed character, and the disease itself almost always so, the treatment should be addressed both to the material and spiritual nature of the patient. This is what renders it difficult. * * *

When a man's "soul gets into his head," to the extent that he cannot sleep, he is in a bad way, and had better speedily adopt some means of driving it out again. * * *

A scrupulous attention to the laws of health, in relation to free, pure air, abundant exercise, suitable diet, cheerful employments, an abstinence from all exciting agencies, and an habitual exercise of calmness and self-control, will generally suffice, even with persons of high nervous temperament, to keep the vital powers in vigorous action, and hold the mind within the traces.

A man should never become so scientific, so sentimental, or so religious, as to forget his dinner; for it is far better to vegetate, or lead a merely inert animal life, than, like a comet, to "shoot madly from our spheres to affright the world."

With regard to the treatment of insanity, it involves a course physiological and metaphysical. The body is first to be attended to, the nervous equilibrium restored, so that the patient shall eat and sleep well. When proper means are used at the commencement, while the patient is still rational enough to co-operate with the means, no doubt the symptoms might often be averted; but when the mind becomes completely disorganized, and the brain has begun to boil and seethe in good earnest, it is not easy to reduce it again by

any material remedies. Narcotics and stimulants have but little effect at this stage of derangement, for the whole system seems to adapt itself readily to this new order of things; so that while the exciting causes may have long been removed, and the scathing billows of fire have retired, in some measure, within their original limits, the once stately edifice they have assailed, remains a charred and desolate ruin, which no skill on the part of the apothecary can reconstruct. * * * *

The forms of mental hallucination are so numerous and so subtle that it is very difficult to unravel the tangled mass, and dissect out a single straight thread of thought, by the skilful management of which reason may be restored. There is usually some leading idea, some ruling fantasy in the mind of an insane man, which is the cause of all his trouble. This becomes, in the hands of a skilful physician, a decoy-duck, by the successful management of which the whole flock may be secured; or, to use a still better figure, this *ignis fatuus*, which leads the poor benighted traveller through bog and brier, and hopelessly bewilders him in pathless solitudes, may become, when caught and guided by a kind and skilful hand, the beacon-light of his salvation, by which he may be softly guided back to the old highway of reason and happiness. It is not by flat contradiction and coercion that the deranged mind is set right: this at once provokes enmity, and the lunatic meets it with a total scepticism which converts his best friends into liars and demons plotting his destruction.

Some one has very shrewdly remarked that the difference between an idiot and a lunatic was simply this—that the former reasons falsely from correct premises, and the latter reasons correctly from false premises. * * * *

Let some one correct, rational idea be substituted in the place of a false one, and that, too, without sensibly disturbing the superstructure, like putting a new sill in a building, and it often paves the way for a gradual and complete recovery. It becomes, as it were, a nucleus, or centre of attraction, round which all the rest will slowly cluster in regular order, and thus a new, and sometimes more beautiful, creation emerge from the chaos. To accomplish this successfully, indirect methods are generally the best. For example, it is quite a common delusion with the insane that he is in the supernatural world; he loses all cognizance of time, and supposes eternity has commenced. In such a case there is but little use in denying this before him. He will believe you to be an emissary of Satan, sent to mislead and ruin his soul; but leave in his way a daily paper of a late date, or, if he be of a literary turn, a new book by some favorite author, and the error will correct itself.

It would be a curious and interesting speculation to inquire a little into the pathology of insanity, with a view of arriving at a metaphysical analysis of it, so as to ascertain, if possible, in precisely what physiological change it consists. The error would probably be found not in the reflective or reasoning faculty so much as in the perceptive or seeing faculties, by which all external objects and their relations are viewed through a false medium, and distorted into unnatural shapes; hence the imagination, which draws upon the perceptive powers for its materials, becomes filled with wild and delusive images. In most cases of total insanity personal identity or consciousness is lost, or merged in the general chaos; and hence, also, it is that the lunatic believes himself to be some other person—a hero or prince, sometimes the devil, and sometimes the Deity himself.

Without dipping too deeply into metaphysics, we might venture to suggest that the human mind, in a healthy state, is neither a simple unity nor a plurality, but rather a confederation of powers, and that consciousness is the quintessence or product of their combined and harmonious action; just as the government of the United States is the product of the combined governments of the several States, so that "*E pluribus unum*" would not be a less appropriate term applied to the mind than to our country. In this con-

sciousness we may suppose the soul resides in its normal state. The perceptive faculties are to the soul what the police is to a city—by them all passports must be *visaed*, so that in the rational mind no ideas of external things or their relations are allowed to enter, which do not correspond with realities: thus truth and reason are maintained. But when insanity takes place, this harmonious confederation is broken up, and each becomes a petty sovereignty, independent within itself. A unity of action is lost, the perceptive faculties become careless, the gates are thrown open, and any gigantic fantasy may walk boldly in and usurp the seat of government! At the same time the spontaneous action of particular faculties may be unimpaired; the memory may be perfect, the moral sentiments correct, and the affections and sensibilities active; but all legitimate communication is cut off, unity is destroyed, reason is deposed, and the soul is a wreck:—

“ Ever drifting, drifting, drifting
O'er the shifting currents of the restless main.”

* * * * *

When public benevolence reaches such a height, or the means of patients are so ample, as to induce the medical faculty to investigate the subject more thoroughly, so that scientific principles can be more generally carried into effect in the treatment of insanity, much greater success may be looked for, and, doubtless, many cases now regarded hopeless would be found not incurable.

—

Usage of Children by their Nurses.—In a former number of this Journal we noticed, at some length, certain abuses of children, and particularly of young infants, at the hands of nurses and attendants. Our observation, in the interval, in no degree negatives the assertions originally made; we witness, almost daily, instances of reprehensible neglect or of stupid ignorance, and sometimes of violence, towards children from well-paid hirelings, which cannot be too strongly condemned. Many things are done out of sight of parents, which, if seen, would so arouse their indignation, that the offending attendant would be at once dismissed; and the true way to remedy this evil is thus to deal with the perpetrator of every *discovered* gross negligence or ill-treatment. In this way, finally, more faithfulness, gentleness and precaution will be obtained for those who cannot complain of mal-treatment themselves.

“On Monday, June 2d, it being “Artillery Election,” there was a wonderful deal of gossiping among the nurses who were taking out children for an airing—and in most instances it was only too evident that the attendants were bent on having “a good time generally,” the little ones rather “running for luck,” as the phrase is. For instance—it may be all very well for a group of nurses to sit down on the *fresh turf* of our Common, by the hour together—if *their* bones ache next day, it is no great matter—they *ought* to know whether it is a prudent thing for them to do so or not; doubtless they can bear it—but are parents willing that their children—and tender infants—asleep too, sometimes, should thus *cultivate the soil*? A word to the wise is sufficient—there ought to be more watchfulness in these matters on the part of parents, if they wish their children to escape bronchitis, lung fever, dysentery, and many other diseases likely enough to attack them under such exposure.

We saw on the same day (and we continually see) a very striking instance of another abuse, to which we referred in the article previously mentioned—and, as it was perpetrated directly before our windows, we could not but particularly notice it. A tall, strong, broad-shouldered man, was dragging a very small child along the side-walk—the child tripped (undoubtedly from being made to travel too fast), and, losing its balance, swung against the man's leg; instantly it was raised in the air, hanging by one arm from the

strong hand of its guardian(?) and, by dint of sundry swingings and swayings, placed on its feet again. Why could not this giant have lifted the dwarf properly, by taking it *under* each arm, or around its waist? It would have required no more time, and there would have been no risk of dislocation of the shoulder, and no pain to the child, as there always must be by the pendulum process so constantly practised. "*Oh, reform it altogether!*"—*Boston Med. and Surg. Journal.*

No more Corns.—There is, no doubt, some quackery in the corn doctor's trade, but there is more ignorance. For the benefit both of him and his patients, we will now disclose a secret which will relieve humanity from a load of misery, not the less difficult to bear that it is unpitied or ridiculous. The cause of corns, and likewise of the torture they occasion, is simply friction; and, to lessen friction, you have only to use your toe as you do, in like circumstances, a coach wheel—lubricate it with some oily substance. The best and cleanliest thing to use is a little sweet oil, rubbed upon the affected part (after the corn is carefully pared) with the tip of the finger, which should be done on getting up in the morning, and just before stepping into bed at night. In a few days the pain will diminish, and in a few days more it will cease, when the nightly application may be discontinued. The writer of this paragraph suffered from these horrible excrescences for years. He tried all sorts of infallible things, and submitted to the manipulations of the corn doctor; but all in vain; the more he tried to banish them, the more they wouldn't go; or if they did go (which happened once or twice under the strong prevailment of caustic) they were always sure to return with tenfold venom. Since he tried the oil, some months ago, he has had no pain, and is able to take as much exercise as he chooses. Through the influence of this mild persuasive, one of the most iniquitous of his corns has already taken itself off entirely; the others he still pares at rare intervals; but, suffering no inconvenience whatever from them, he has not thought it necessary to have recourse to caustic—which sometimes, if not very carefully used, and vinegar and water applied at once to the toe, causes almost as much smart as the actual cautery.—*Chambers' Jour. and Virginia Med. Journal.*

Results of the Quantitative and Qualitative Analysis of Homœopathic Medical Preparations. By EDWARD H. PARKER, M. D., of New York City. Read before the New Hampshire State Medical Society. (*From the Transactions.*)

During the last two years my attention has been repeatedly called to the drugs used by gentlemen professing to practise medicine "homœopathically." In consequence of my observations I determined, as opportunity offered, to obtain specimens of the remedies actually used by these practitioners, and sold by various pharmacutists, and to submit them to an experienced chemist for analysis. This has been done in three instances with the following results:—

The first analysis was made of the contents of two vials, marked respectively *Mercurius Solubilis*, and *Arsenicum*. This is their history.

A gentleman with whom I had become acquainted in some business connections, often talked to me of his health, and of the treatment to which he was subjected by a prominent homœopath of this city. Among other powders, he showed me some which he was taking, and which I was sure contained a notable quantity of nitrate of silver. He also praised the treatment to which his child was submitted when it had a diarrhoea from teething, or other cause. A gray powder and a white one were given alternately, and the child liked to take them. His wife kept them constantly by her, and if the child had a discharge from the bowels which she thought was a little too loose, she would give her a few doses of these powders. She thought, however, that the blackish powder (*merc. solub.*) did the most good. My friend constantly urged me to try them, for, I think that because I did not rail at

homœopathy, but spoke of its practitioners as I would of other gentlemen, he had some hopes of converting me to his faith, than which I can conceive of no more preposterous supposition. Finally, I requested him to procure for me some of the same powders he was using for his child. This he did, and I placed them in the hands of Dr. Arthur Du Berceau, of this city, who is a skilful analytical chemist. This is his report:—

One hundred parts of white powder, marked *Arsenicum Alb.*, contains 1.112 of *Arsenious Acid*. The remainder is cane sugar. The second, marked *Solubilis Mercury*, contains in one hundred parts 11.00 of *Metallic Mercury*. The remainder is cane sugar. The mercury was in the condition of black oxyd, obtained by the reaction of proto-nitrate of mercury and ammonia.

The mother, when told of the amount of mercury and arsenic which she had been giving to the child, was horrified, and has since used them less indiscriminately.

At my request, the same friend purchased for me a case of medicines of a homœopathic druggist. It is like those which he ordinarily sells for family use. This I also placed in the hands of Dr. Du Berceau, and he obtained the following results:—

In the bottle marked Calc. Carb., 100 parts of powder contain 1.066 Carbonate of Lime.

In the bottle marked Carb. Vegetabilis, 100 parts of powder contain 0.500 fine Charcoal.

In the bottle marked Arsen. Alb., 100 parts of powder contain 1.120 *Arsenious Acid*.

In the bottle marked Mercur. Solub., 100 parts of powder contain 1.350 *Metallic Mercury*.

In the bottle marked Hepar. Sulph., 100 parts of powder contain 0.900 Sulphur.

In the bottle marked Stibium, 100 parts of powder contain 0.500 Oxyd of Antimony.

In the bottle marked Sulphur, 100 parts contain 0.100 Sulphur.

In the bottle marked Phosphorus, 100 parts solution contain 0.430 Phosphorus.

The fluid contents of the vials in the case, with the exception of the last two in the preceding list, were not examined, partly because I wished to preserve them to satisfy the minds of those who might desire to see for themselves; and partly because it is so difficult to do anything more than to ascertain the quantity of solid matter which remains after evaporation of the menstruum. The qualitative analysis of organic substances is well known to be one of the most difficult and uncertain of the operations of the chemist. The sugar in these powders was that obtained from milk.

It will be observed, that in this instance the arsenic and soluble mercury are the strongest preparations, though the latter does not compare in its amount of metallic mercury with the proportion found in the first analysis. These two remedies seem to be great favorites with homœopaths, being frequently prescribed by them. Why this is we now understand.

About the same time I obtained a set of preparations which had been used by a physician who determined to try his hand at homœopathy, and took advantage of the position which he occupied in one of the dispensaries of New York to make his experiments. After his resignation, the preparations which he had been using were left in the hands of the apothecary of the institution, and some of them were selected by me for analysis. They were purchased at a different shop from those which were before analyzed, and the direction given was, that when about two-thirds of the vial in any bottle (they were all solutions) were used, the vial should be filled up with proof spirits. This will, perhaps, account for some of the variations in the strength of the preparations. It was found that there was of—

Tincture of Silica, in 100 parts 0.025 of Silica.

Tincture of Hepar. Sulph., in 100 parts 0.050 of Hepar Sulph.

Tincture of Baryta Carbonica, in 100 parts 1.450 of Carbonate of Baryta.

Tincture of Calc. Carbonica, in 100 parts 0.500 of Carb. of Lime.

Tincture of Arsenica, in 100 parts 0.025 of Arsenious Acid.

Tincture of Carb. Vegetabilis, in 100 parts 0.050 of Charcoal.

Tincture of Mercurius Solub., in 100 parts 0.100 of Solub. Mercury.

Tincture of Lachesis, in 100 parts 0.025 residue after evaporating the alcohol.

Tincture of Sepia, in 100 parts 0.025 residue after evaporating the alcohol.

Some of these preparations, as the Baryta Carbonica, contained a thick sediment which carried up the per centage. The other preparations which were left were vegetable, and were therefore excluded from the analysis.

These are all the analyses which I have yet caused to be made, but they are somewhat instructive. The first two preparations were obtained by the direction of a homœopathic practitioner, and one of them, the *merc. sol.*, is more than one-tenth pure mercury, the proportion of the oxyd being consequently somewhat greater. The "arsenicum" contains 1.112 parts of arsenious acid, while the usual form in which arsenic is given, viz: Fowler's solution, contains one-half a grain to each fluidrachm, the dose for an adult being about ten drops.

The second analysis was of drugs sold for "family use," and it is observable that the *arsenicum* is even richer in arsenious acid than the first. The *mercurius* has a much smaller portion of metallic mercury, and yet there is sufficient in it to produce all the effects of this metal when given in small doses. The tinctures accompanying the powders are, so near as I can tell by the ordinary modes of examination, of as great if not greater strength than the corresponding preparations used by physicians. Though contained in small ounce vials, their color is marked—the *Rhus Toxicodendron*, for instance, being of a deep olive color, as is also the tincture of *Dulcamara*. *Ipecacuanha*, *aconite*, *arnica*, *cantharides*, all give tinctures of decided color in these small vials. The *aconite*, indeed, I have used for patients, and find that it produces the same results that ordinarily follow the use of the saturated tincture. Having occasion to use tincture of chamomile, I had some made by a druggist, and filled one of the vials with it. The color of the homœopathic preparation was quite as marked as the other. The tincture of *china*, which being translated means *cinchona*, is a good simple tincture of Peruvian bark.

The third set consists of much weaker preparations, and yet here it is noticeable that, excepting the carbonate of lime and the carbonate of baryta, *merc. solub.* stands highest in its proportion.

If an average is made of the percentages of these three analyses we shall have this result: for the first 6.056, for the second .745, for the third .250. In contrast with these figures others may be put, showing the percentage of the drug which is left, in preparations made according to the directions of Hahnemann for potentizing medicines. The first dilution has in 100 parts 1 part of the drug. The second dilution has in 100 parts .01 part of the drug. The third has in every 100 parts .0001 part of the drug. Beyond this it is not necessary to go; though every one remembers how much stress was and still is laid upon high potentizations, those who use the thirtieth dilution being considered very moderate. The two hundredth is much preferred by some, and yet the weakest preparation of these three classes, obtained from direct sources, is stronger than the second dilution.

It may be asked how it is that such an abandonment of "potentization" should have occurred among homœopaths themselves, for these drugs came from their pharmacutists, from the shops patronized by all the prominent men of that school in this city. The question can be answered only by referring to the positions which they now occupy. If these gentlemen

are shown such proofs of the strength of these preparations as these analyses afford, or such as the very appearance of their tinctures gives, they will not for a moment deny that we are correct, or that there is anything in this which is inconsistent with homœopathy. They will say they are *homœopathists*, but they are not *Hahnemannists*. O no! not they. How could one be so stupid as to make such a blunder. They believe in the doctrine, *similia similibus curantur*, but they do not find that potentization as taught by Hahnemann is borne out by experience. To be sure, this is no more than the whole medical profession has been saying ever since the absurd doctrine was propounded, and it is no more than common sense teaches; but if one suggests this to them, and congratulates them on their returning senses, he gets very little thanks for his trouble. The fact, however, of this entire change of position should be more generally known and appreciated by the profession than it is, so that we may not waste time in assailing a position which has been entirely abandoned. It is safe to attribute any supposed effect of a decillionth of a grain of charcoal to imagination, but it is not quite safe to attribute to the same influence the effects of five drops of saturated tincture of aconite. Under these circumstances it might happen that a homœopath and a physician would both treat a patient in the same way, their only difference being in their process of reasoning. Both give quinine in intermittent fever; the homœopath because, as he alleges, it will produce in a healthy person similar symptoms; the physician for the reason that he knows it usually cures the disease; not, as is slanderously reported, because he believes it will produce symptoms unlike intermittent fever. He is no *allopath*. It did in fact happen to a friend of mine to be asked to see a patient who was under the care of a homœopath, not in consultation with him, but because he was desired to give his opinion whether or not it was safe to trust the patient still longer under the treatment. The disease was typhoid fever, and he found *Spiritus Mindereri* and all the usual remedies in ordinary doses, the patient doing very well. He could not but say to the attendant, "if this is homœopathy, I am a homœopath." To be sure the physician may write a prescription for *cinchona*, and the homœopath may write one for *china*; or the one for *hydrargyri oxidi nigri*, and the other for *merc. solub.*; one for *antimony*, and the other for *stibium*, but both mean the same thing, and the patient will receive the same drug.

It is a question of practical interest to the profession to ascertain what there is of good; if any, in homœopathy. Almost every "new school" enables us to gain some profitable suggestions, which repay the labor of sifting them out of a large mass of chaff. The Hahnemannists have tried experiments in the treatment of diseases with nothing which we should not have been justified in making, and they have thus taught us something in the natural history of disease. In their progress from infinitesimals to large doses, it has been necessary for them to conceal the change in their medicines, and therefore they have studied the art of giving medicines in the most agreeable, or in the least offensive form, and in this respect we can learn something from homœopathy. The old school of practitioners, who, when called to a patient's house, seemed to make it their first duty to fill it with eight-ounce vials, have not entirely passed away, neither have their abominably tasting compounds entirely disappeared. Their big bottles, their tablespoonful doses, their nauseous mixtures, have driven and still do drive family after family to homœopaths, simply because it is not human nature to desire to drink such a mixture as tincture of aloes and assafoetida with castor oil and turpentine in equal parts, a wineglassful at a time, if almost tasteless water or a sweet powder will accomplish the same good. To doctors, even, when they fall sick, an agreeable draught is preferable to one the very thought of which stirs them to their lowest depths.

It is not necessary to point out the mode in which concentrated tinctures can be made to supply the place of less powerful preparations. Neither is

it necessary to do more than hint at the frequent desirableness of giving small doses often, rather than a single large draught. A few drops of aconite tincture, in water, is vastly pleasanter than even spiritus mindereri or sweet spirits of nitre. The dose of Norwood's veratrum viride is much pleasanter than infusion or even tincture of digitalis.

But the lesson is more important with reference to powders. For adults, solid substances can usually be given in pill form, but there is no necessity of rolling them in powdered aloes. To this day, I cannot rid myself of the remembrance of the disgust with which I used to swallow pills so coated, and with difficulty convince myself that the druggists now use only liquorice or more tasteless powders. Still, for these pills we need not select the most bulky drugs. The active principles of plants, when isolated, aid us in diminishing our pills, and will still more when their powers and properties are fully tested.

Children, however, do not readily swallow pills, and agreeable powders are often a great desideratum while treating them. A child's life may depend upon his taking remedies willingly and without compulsion. Thorough trituration of the drug with sugar seems to accomplish this best, especially if, when it is practicable, the doses are divided, but repeated oftener. The homœopathic dispensatories direct that powders should be placed upon the tongue and allowed to dissolve, when they are to be washed down with a good draught of water. There is some philosophy in this, for the dissolving sugar first gives the impression to the nerves of taste, and the water washes down the balance almost untasted. In the minds of children, moreover, the first taste seems to be associated with the fact of taking the powder, while the second and more disagreeable one is not remembered against the dosing. To avail one's self of this fact, it is necessary that the sugar should be reduced to an impalpable powder; otherwise the end is not obtained. If, for instance, ordinary crushed or granulated sugar is used, it will be found that it is not an actual powder, but a mass of more or less complete crystals. On mixing a powder with these it either falls to the bottom, or, clinging to the crystals, coats them over. In this condition the sugar is less readily dissolved than when in powder, and, in addition, each crystal is covered on its outside with the drug, which is first dissolved and gives its taste to the whole mass. Here, then, is the advantage, and the only one, of the triturations recommended by Hahnemann.

Comparative Value of the Different Hæmostatic Agents.—A correspondent sends us the following translation, which we publish as conveying valuable information upon an important subject.—*Boston Med. and Surg. Journal.*

The *Gazette des Hôpitaux*, of Sept. 29th, in an article on the comparative value of different substances as means of arresting hæmoptysis, after remarking that bleeding for this purpose has deservedly fallen into general disfavor, alludes to the clinical researches of Dr. Aran, published in the *Bulletin Gén. de Thérapeutique*, and gives a *résumé* of the interesting and valuable results to which he had arrived. We translate passages which seem to us of considerable value.

M. Aran has successfully tried agents belonging to the class of hæmostatics, properly so called, such as resinous substances, the ergot of rye, and common salt; then astringents—acetate of lead, alum, *eau de Rabel*, tannin, and gallic acid; nauseants and emetics—ipecac, tartar emetic, veratrine; and sedatives of the circulation—nitre and digitalis.

Of the agents belonging to the first group, hæmostatics proper, the essence of turpentine has seemed to M. Aran especially to deserve the attention of physicians. He has prescribed it pure, in doses of from ten to thirty drops, in a glass of water, or made up into a bolus with magnesia, and taken enveloped in moistened wafer (*pain à chanter*). Generally within a few hours after the patient commences taking it, there is a very marked diminution in the

amount of the hemorrhage, and in twenty-four or thirty-six hours at the most, it is reduced to a very small quantity or entirely ceases. On the other hand, M. Aran is convinced, as many English and German physicians have already proved, that the essence of turpentine is less suitable in hæmoptysis, with a tendency to inflammatory action within the chest, a febrile movement, or when it occurs in young or rather plethoric subjects, than when it happens in debilitated, cachectic subjects, with characters of *passivity* or atony.

Ergot of rye and the ergotine of M. Bonjean, have shown much less efficacy against hæmoptysis than essence of turpentine. The former, even, when given in a very large dose, has seemed to exert only the most moderate influence upon the hemorrhage.

The same is not the case with chloride of sodium or common salt, which has been proved to possess an undoubted efficacy in doses of from sixty to one hundred and fifty grains taken in the course of a few hours in solution, or in the form of powder. It is particularly deserving of recommendation in such cases, as it is constantly at hand.

Among the astringents, M. Aran has found none worthy of confidence except tannin and gallic acid. Gallic acid seems to him preferable to tannin, as, with the same styptic properties, it has not the same drying action upon the tissues, and does not produce the obstinate constipation which occurs when the latter is employed. The medium dose of gallic acid, as he administered it, was, from ten to twelve grains in twenty-four hours, in powders of two grains each, given at intervals of two hours.

M. Aran acknowledges the power of nauseants and emetics to arrest hæmoptysis, such as tartar emetic, ipecac, and veratrine. With regard to the first two this property has been known for a long time. As for veratrine, in three cases in which it has been prescribed, the hæmoptysis was arrested as if by enchantment as soon as nausea and vomiting took place. These agents would deserve, then, to be placed in the first rank of hæmostatics, if there were not others of equal efficacy, which do not produce nausea and vomiting, effects which are always painful or disagreeable to the patient.

Nitre and digitalis have been equally, and with good reason, extolled in this case by the name of sedatives to the circulatory system. Following the example of Schmidtman, who conceived the idea of combining sea salt with digitalis to combat hæmoptysis, M. Aran, for the same purpose, combined digitalis and nitre. This mixture, it appears, produced very remarkable results.

In ordinary cases he gave in the course of twenty-four hours four grains and a half of digitalis and twenty-three grains of nitre in four powders. But when the hemorrhage was very profuse, the quantity of nitre was carried as high as thirty-eight grains, and that of digitalis to eight or even twelve grains; in some very grave cases the quantity of digitalis given was carried to twenty-three grains, and of nitre to sixty grains. A remarkable circumstance noticed was, that when these remedies were given in this quantity the system was not affected in any unfavorable manner; the pulse did not suddenly abate in frequency, nor was there a very abundant diuresis. On the other hand, the effect upon the hæmoptysis was most marked; in a few hours the flow of blood was considerably reduced, and often after twenty-four or thirty-six hours there remained only a little bloody expectoration. The diminution of the hemorrhage was generally accompanied by a great calm. Nevertheless M. Aran observed that never, after the administration of essence of nitre and digitalis, was the arrest of hemorrhage so sudden as after the administration of turpentine or gallic acid.

M. Aran sums up his opinion of the respective value of the different agents in question, in the following words: In profuse hæmoptysis, but not immediately threatening life, the physician may take his choice of either of the preceding remedies. In very profuse hæmoptysis, on the contrary, where it is necessary to arrest the bleeding as soon as possible, and by means the

least likely to depress the system, the physician cannot trust the tardy remedies. Neither the ergot, nor sugar of lead, nor *eau de Rabel*, nor alum, nor rhatany, &c., will be equal to the emergency. Only turpentine, gallic acid in a large dose, salt, nitre combined with digitalis, can be employed with success; but the necessity of proportioning the dose of the medicine to the intensity of the hemorrhage, in administering the chloride of sodium, but particularly the nitre and digitalis, is productive of great inconvenience; the danger of too great a depression from too large a dose, or from too long a continuance of the remedy.

"It is, then, to gallic acid and to turpentine that I give the preference in these grave cases; yet, under the apprehension of their insufficiency, I do not think the physician should limit himself to their use. It is under such circumstances that bandages applied to the limbs, which are very useful in other kinds of hemorrhage, and ice applied to the chest, have saved the life that was in danger, by stopping the hemorrhage for the moment, and allowing the internal remedies to complete the work." A.

Synopsis of Thirty Cases of Ovariectomy. Performed by WASHINGTON L. ATLEE, M. D., Philadelphia.—Dr. Washington Atlee gives a summary of all the cases, thirty in number, in which he has performed the operation of ovariectomy. Such an assemblage of facts constitutes a valuable contribution to the history of this subject. We can only give a condensed view of the leading facts.

| Case. | Died. | Recovered. | Tumor found. | Operation completed. |
|--|-------|------------|--|----------------------|
| 1. Sixth day—peritonitis..... | — | — | Double ovarian..... | Yes. |
| 2. ————— | — | Yes .. | Fibrous extra-uterine..... | Yes. |
| 3. ————— | — | Yes .. | Ovarian, fibrous..... | Yes. |
| 4. Six months—erysipelas | — | — | Uterine..... | No. |
| 5. ————— | — | Yes .. | Cystiform..... | Yes. |
| 6. In 3½ years, from progress of disease..... | — | Yes .. | Uterine..... | No. |
| 7. Thirty-nine days after, of cholera, caused by eating duck..... | — | Yes .. | Extra-uterine fibrous..... | Yes. |
| 8. Sixth day—peritonitis..... | — | — | Cystiform..... | Yes. |
| 9. Third day—exhaustion..... | — | — | Cystiform..... | Partly |
| 10. Third day—exhaustion..... | — | — | Cystiform..... | Yes. |
| 11. ————— | — | Yes .. | Uterine..... | No. |
| 12. ————— | — | Yes .. | Cystiform..... | Yes. |
| 13. ————— | — | Yes .. | Cystiform..... | Yes. |
| 14. Pregnant two months at time of operation; died in 30 days of exhaustion..... | — | — | Double cystiform..... | Yes. |
| 15. Third day—peritonitis..... | — | — | Cystiform..... | Yes. |
| 16. Third day—hemorrhage..... | — | — | Extra-uterine fibrous..... | Yes. |
| 17. ————— | — | Yes .. | Extra-uterine fibrous..... | No. |
| 18. ————— | — | Yes .. | Cystiform..... | Yes. |
| 19. Thirteen hours—exhaustion..... | — | — | Cystiform..... | Yes. |
| 20. Nine hours—exhaustion..... | — | — | Ovarian..... | Yes. |
| 21. Third day—peritonitis..... | — | — | Three fibrous extra-uterine..... | Yes. |
| 22. ————— | — | — | Cystiform..... | Yes. |
| 23. 22 days—gangrene of jejunum..... | — | — | Cystiform..... | Yes. |
| 24. ————— | — | Yes .. | Cystiform..... | Yes. |
| 25. Fifth day—exhaustion..... | — | — | Cystiform..... | Yes. |
| 26. ————— | — | — | Cystiform..... | Yes. |
| 27. Fifth day—hemorrhage..... | — | — | { Fibrous and cystiform, } { both ovaries..... } .. | Yes. |
| 28. ————— | — | Yes .. | Cystiform..... | Yes. |
| 29. Sixth day—hemorrhage..... | — | — | Cystiform..... | Yes. |
| 30. ————— | — | Yes .. | Cystiform..... | Yes. |

From the tabular statement we have thus constructed, it appears that out of 30 cases in which the operation for ovariectomy was undertaken, ovarian tumors were found in 22 cases, and fibrous tumors of the uterus in 8 cases; that in 4 cases the operation was abandoned, in as far as related to the object of the operation—the removal of the tumor; that 13 cases only recovered with life, in 2 of these the tumor being left behind; that in 17 cases the patient died, at intervals of from nine hours to thirty days after the operation, with the exception of one that survived six months. The causes of

death were—in 3 cases, hemorrhage; in 6, exhaustion; in 4, peritonitis; in 1, gangrene of jejunum; in 1, cholera from indigestion; in 1, erysipelas. It is right to state, that in some cases the author attributes the death to causes independent of the operation. In 7 cases the operation was undertaken under desperate circumstances, and with a view of arresting impending death; 5 of these died; 2 survived.—*Amer. Journ. Med. Soc.*

Hair Dyes, &c.—Prof. HADLEY stated that he had been unable to find any treatises upon the subject which afforded him any assistance, and he was, therefore, obliged to speak from his own knowledge of the chemical constitution of nearly all the various articles in use: either as dyes, depilatories, or for improving its growth and appearance. To this he should principally confine himself.

The history of the use both of hair dyes, and of preparations for beautifying the hair, extends to the remotest antiquity, and no people, however degraded or however elevated in the scale of civilization, has ever existed, among whom we may not find their use to be prevalent.

At the present time, as probably in all others, the object sought by a hair dye is the production of a color darker than the one worn. We never hear of any article being used for decolorizing the hair, or substituting an auburn or light-brown for any darker hue.

All the various hair dyes in use are made from the different salts of two metals, viz: lead and silver. Other substances *may* be used, but they are either too expensive or too injurious to the hair itself.

1st, Lead. Several salts of lead are used; but the most common lead dye is that made from litharge and lime. Equal parts of lime and litharge are rubbed into a paste, with sufficient water to furnish the proper consistence. This paste is then very freely applied to the hair, being well rubbed into it, and thickly laid on. It is kept moist by oil or India-rubber cloth, and allowed to remain for from three to eight hours—is usually put on at night and kept on during sleep. The color which results is unexceptionable, being a fine dark black.

It will be noticed that this dye is applied to the skin, but does not color it. Prof. H. stated that he applied it to his arm for a period of six hours. The hairs beneath were died, but the skin remained colorless. This is the more curious, from the fact that, physiologically, the hair and the epidermis are the same in their elemental construction. There is, however, but little doubt that the coloring properties of lead depend on the deposition of a sulphuret in the hair. Most protein substances emit sulphuretted hydrogen on the action of caustic alkalis. In the process of "hulling corn," by placing it in ley, the grain is blackened by the alkali. The process of this hair dye, then, is as follows: The litharge is in part dissolved by the caustic lime, and the lead, thus rendered soluble, penetrates the hair and is deposited as a sulphuret of lead. It is remarkable that in the use of this dye the *dandruff* is colored.

The formulæ of lead dyes vary. Sometimes white lead is used; sometimes whiting or flour are added to prevent the too caustic action of the lime. Some formulæ, like the prescriptions of the older physicians, contain a dozen or more ingredients, only a few of which are essential.

Prof. Hadley stated that he had heard no complaints of the effect of this dye on the skin. The hair, however, is rendered brittle by its use, and must be oiled to prevent its breaking. In spite of any precaution the ends will crack off, and its use is often abandoned for this reason, though the color produced is unexceptionable.

"Twigg's Hair Dye" is simply a weak solution of acetate of lead to which precipitated sulphur is added. It is put up by almost every druggist, and sold under many different names. The continued use of it does, in many instances, cause the hair to grow darker, though Prof. H. had never seen a

black color produced by it. It also checks the formation of dandruff. In its effects it corrugates the skin, which becomes harsh, and the person using it assumes a peculiar, old, wrinkled look. This, however, soon passes off. The directions, unlike other dyes, insist on its being well rubbed in.

Silver Dyes. These are much more used than the lead. The effects of light on the salts of silver are well known. The chloride of silver when exposed to light in a moist state, turns black; and the photographic process is entirely similar, except that the effect of the light upon the iodide or bromide of silver is not visible until subjected to reagents. In a similar manner these dyes are put up; some of them consisting simply of a single bottle of a solution of a salt of silver when the action of light is alone relied on as the reagent, ("dyes without preparation;") or in other cases a reagent accompanies the package ("dyes with preparation").

Nitrate of silver is the salt used in the manufacture of all these dyes, but it does not exist as a nitrate in the dye. Pure nitrate of silver is not affected by light; it may be exposed in a window for years, if tightly corked, without change. The change of color is uniformly due to the presence of organic matter, as when paper is wrapped around the sticks, or where the crystals come in contact with the cork of the bottle.

In dying the hair many use the "dye without preparation," and expose to light. This is a slow process, and the hair should be thoroughly cleansed by soap and soda before its application. In experimenting in the laboratory, Prof. H. found that by boiling the hair in caustic soda he was able to produce a deep permanent black with a dye of only one-eighth the ordinary strength. No dyes now sold contain simple nitrate of silver; all are more or less mixed.

In the use of dyes with preparation, a mordant accompanies the dye. In twenty or thirty different dyes which Prof. Hadley had analyzed, this preparation consisted uniformly of a weak solution of gallic acid, in the proportion of one grain of the acid to one hundred grains of water. This reduces the salt to an oxyde, instantaneously, constituting a large saving in time, while the tint is better than in the dyes without preparation. These latter leave the hair with a reddish tinge, particularly in reflected light, unless the dye be very strong, or twice used.

In some dyes three bottles are put up, one of which is only to be used on the failure of the other two. This third bottle always contains a little sulphuret of sodium, potassium, or ammonia. In two hair dyes manufactured in Philadelphia, no solution of gallic acid is put up, but instead of it the second bottle contains sulphuret of potassium or sodium. The objections to this plan are serious. The odor of sulphuretted hydrogen is offensive, it is very caustic, and acts on the skin, so that if not used with care the hair may be scraped off easily with the back of a knife, or pulled out by handfuls.

The nitrate of silver acts upon the hair as upon other organic tissues. It kills it, producing a firm dry, hard eschar, which, in the case of an ulcer, protects the parts beneath. All of these hair dyes are warranted not to stain the skin; but all of them will stain it if they come in contact.

The percentage of silver in the dyes sold varies very much. Prof. H. had analyzed nearly all the dyes sold, and found the percentage to vary from four to eighteen per cent. of metallic silver. The following will illustrate: One hundred parts of dye contain

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| In Ballard's Hair Dye, | 6 per cent. of silver. |
| Batchelor's (Utica prep.), | 16 " " " |
| " " (New York prep.) | 18 " " " |
| Phalon's, | 18 " " " |
| Christadoro's, | 15 " " " |
| Mathew's, | 5 " " " |

(Many others were given.)

This percentage, however, furnishes no index to the actual value or cost of the dye, inasmuch as the size of the bottle varies, and also the price. Thus each bottle of these various dyes contains of solid silver:—

| | |
|----------------------------|----------------------------------|
| Ballard's Dye, | silver to the value of 10 cents. |
| Phalon's " | 10 " |
| Batchelor's (Utica prep.), | 8 " |
| " (N. Y. prep.), | 8 " |
| Christodoro's, | 8 " |
| Clirehugh's | 8 " |

All these are sold at one dollar per bottle, leaving an enormous profit. Mathew's dye is sold at half a dollar per bottle, each bottle containing 7c. of metallic silver. The quantity of silver thus subtracted from the currency is very large. One firm in this city used last year (in a period of thirteen months) 1100 ounces of silver coin.

There is a common belief among the Chinese, that a certain weed, taken internally, would cause the hair to grow black, and attempts have been made by speculators here to discover it, and introduce it in this country.

Prof. Hadley continued his remarks, taking up briefly the subject of preparations for beautifying the hair. These promise everything: to cure baldness, prevent dandruff and falling of the hair, etc. etc. Oils and fats are mostly used in them. The great difficulty in the use of free oils is their liability to become rancid. A few years ago nearly all the liquid hair oils were made from lard oil, colored. The usual color was red, produced by alkanet, the red color of which is soluble in oils.

More recently castor oil is almost exclusively used. When pure it is too thick for convenient use, and is, therefore, mixed with strong alcohol, as follows: R.—Castor oil, \mathfrak{z} x; alcohol, \mathfrak{z} ij; essential oils, \mathfrak{z} ij.

These latter are used as perfumes.

The various Tricopheri, the Renovators, and Kathairons, are pretty nearly alike. All contain alcohol in large proportion, and all have tincture of cantharides as a stimulant. Various perfumes are used to convey a distinctive character. The following formula is a good one, and a fair sample of these articles: R.—Castor oil, \mathfrak{z} vj; alcohol, \mathfrak{z} xxvj; tr. cantharides, \mathfrak{z} j; essential oils, \mathfrak{z} jss.

Colognes are simply perfumed alcohol.

Depilatories are usually powders, and almost without exception contain arsenic. The best of these is an old Turkish one, and consists of orpiment (tersulphuret of arsenic) ground with quicklime and water into a paste, which is applied to the hair. The gland secreting the hair is not destroyed, and the hair is reproduced. Of course these arsenical preparations (and all which Prof. H. had examined were arsenical), are injurious. They would be less so were real orpiment used; but the orpiment of commerce is almost pure white arsenic. The alkaline sulphurets may be used as depilatories, but are unpleasant on account of the odor of sulphuretted hydrogen.—*Buffalo Medical Journal*.

Paracelsus.—It has not inaptly been observed,¹ that "in the true infancy of science, philosophers were as imaginative a race as poets." No discovery, in short, was promulgated but in combination with the marvellous. Hence the "Admirable Secrets" of Albertus Magnus; the "Natural Magic" of Baptista Porta; the "Demones" of Cornelius Agrippa; the "Elixir of Life" of Van Helmont; and the "Fairy" of Paracelsus. It would be no easy task to assign the earliest age of quackery in medicine. It is, perhaps, coeval with the introduction of chemistry, but the first renowned quack is probably to be found in Paracelsus. He boasted his power of making man immortal,

¹ D'Israeli's *Curiosities of Literature*, second series, vol. iii. p. 1.

yet he died at the early age of forty-eight years, in the hospital of St. Sebastian, at Salzburg in Germany, in the year 1541, having followed a life of great indulgence and dissipation. It is not a little singular that the family name of this "strange and paradoxical genius" should have been *Bombastus*, which he changed, as was a common practice of the times in which he lived, to another, and assumed that of Paracelsus. His zeal and application were extraordinary. He derived his knowledge from travelling in various parts of the world, and consulting monks, conjurers, barber-surgeons, old women, and all persons said to be gifted with the knowledge of secret arts, remedies, &c. He was professor of medicine at Basle, but became renowned by a nostrum called *azoth*, which he vaunted as the philosopher's stone—the medical panacea—the tincture of life. He styled himself "the monarch of physicians," and arrogantly exclaimed that the hair on the back of his head knew more than all authors; that the clasps of his shoes were more learned than Galen or Avicenna; and that his beard possessed more experience than all the academy of Basle: "*Stultissimus pilus occipitis mei plus scit, quam omnes vestri doctores, et calceorum meorum annuli doctiores sunt quam vester Galenus et Avicenna, barba mea plus experta est quam vestrae omnes Academiae.*" Extravagant as all this may appear, it yet had the effect of dissipating a too excessive admiration of the ancients, at that time prevalent in the schools. His boldness was such, that at his first lecture upon his appointment to the professorship in the University, he, before his pupils, publicly burnt the writings of Galen and Avicenna! His education, however, was very imperfect, and he was ignorant even of his own vernacular tongue. Thomas Erastus, one of his pupils, wrote a book to detect his impostures. He was, nevertheless, a man of great ability, and did much towards the advancement of chemical knowledge, particularly in its application to the purposes of medicine. Armed with opium, antimony, and mercury, he effected many extraordinary cures.—T. J. PETTIGREW.—*N. O. Med. and Surg. Journal.*

A POETICAL DUN.

(ALTERED FROM MRS. PROT.)

"Should you ask us why this dunning,
Why these sad complaints and murmurs,
Murmurs loud about delinquents
Who have read the Journal monthly,
Read what they have never paid for,
Read with pleasure and with profit,
Read of news both home and foreign,
Read of essays and of abstracts,
Full of wisdom and instruction;
Should you ask us why this dunning,
We should answer, we should tell you,
From the printer, from the mailer,
From the prompt old paper-maker,
From the landlord, from the carrier,
From the man who taxes letters
With a stamp from Uncle Samuel—
Uncle Sam the rowdies call him—
From them all there comes a message,
Message kind, but firmly spoken,
'Please to pay us what you owe us.'
Sad it is to hear such message
When our funds are all exhausted,
When the last bank-note has left us,
When the gold coin all has vanished,

Gone to pay the paper-maker,
Gone to pay the tolling printer,
Gone to pay the landlord tribute,
Gone to pay the active carrier,
Gone to pay the faithful mailer,
Gone to pay old Uncle Samuel—
Uncle Sam the rowdies call him—
Sad it is to turn our ledger,
Turn the leaves of this old ledger,
Turn and see what sums are due us;
Due for volumes long since ended,
Due for years of pleasant reading,
Due for years of toilsome labor,
Due despite our patient waiting,
Due despite our constant dunning,
Due in sums from five to twenty.

Would you lift a burden from us?
Would you drive a spectre from us?
Would you taste a pleasant slumber?
Would you have a quiet conscience?
Would you read a paper paid for?
Send us money, send us money,
Send us money, send us money,
SEND THE MONEY THAT YOU OWE US!"

Virginia Med. Journal.

Feb. 10, 1857.